

**The Long Journey Home XIII**  
**Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs:**  
**Fiscal Year 2004 Service Delivery and Performance**

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## Executive Summary

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) health care system. Starting October 1, 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs). FY 2003 saw further reorganization with the consolidation of VISNs 13 and 14 into the newly designated VISN 23. The implementation of the VA reorganization and the budget stresses during recent years have stimulated a major review of VA mental health care programs at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible outpatient and community-based clinics is a national VHA goal and continues as a major focus of activity, with a large number of the Millennium Bill programs becoming operational in FY 2003. In the past several years the spectrum of programs for the treatment of PTSD in VA has substantially widened to include a rich array of outpatient clinics, short-term hospital programs, and non-hospital residential rehabilitation programs, gradually replacing the once widely established Specialized Inpatient PTSD Units (SIPUs). Evaluation studies have shown that long-term inpatient treatment of PTSD is not more effective than shorter term hospital treatment with outpatient follow-up care, and is considerably more costly (Fontana and Rosenheck, 1997a). These findings have stimulated significant reallocation of resources for PTSD treatment.

This summary of data on VA treatment programs for PTSD is a component of the National VA Mental Health Program Performance Monitoring System (Greenberg and Rosenheck, 2005), and has been prepared to assist clinicians, administrators and planners in their review of programmatic options for treating PTSD. Information is presented in four sections: (1) A national overview and performance assessment of PTSD treatment in VA including utilization data on both specialized and non-specialized programs; (2) A review of patients treated and services delivered by the Specialized Outpatient PTSD Programs; (3) A review of changes in VA's programmatic capacity to provide treatment for PTSD, and (4) Outcomes monitoring of Specialized Intensive PTSD Programs.

In this report we present information on:

- (1) the population of veterans residing in each VISN, including the total number who receive VA compensation for PTSD (241,543), and the proportion of those using VA mental health services annually who are service connected for PTSD (60.4%);
- (2) the distribution of specialized PTSD programs, and their funding, across VISNs (there are 143 specialized programs nationwide, ranging from 4-13 per VISN);
- (3) population coverage and workload of specialized *outpatient* PTSD programs (80,201 veterans were seen in FY 2004, a 12.1% increase over FY 2003, and 60,160 veterans were treated [seen more than once] in FY 2004, a 10.3% increase over FY 2003);
- (4) workload and cost data on treatment provided by specialized *outpatient* PTSD

- programs (there were 695,417 visits in FY 2004, a 7.7% increase over FY 2003; the average cost per visit was \$78 and the average cost per capita was \$897);
- (5) population coverage and utilization of *inpatient* treatment for PTSD  
(VA Census data show 219 occupied general psychiatry *beds* are used to treat veterans with a primary diagnosis of PTSD, a 7.2% decrease from FY 2003, constituting 7.18% of all general psychiatry beds. Discharge data show a total of 6597 *episodes* of inpatient treatment for PTSD in FY 2004, compared to 6823 in FY 2003, a 3.3% decrease);
  - (6) workload and cost data on treatment provided by *specialized* inpatient and residential PTSD programs (there were 3995 admissions in FY 2004 at an average cost of \$6476 per admission and \$136 per day);
  - (7) changes in PTSD program workload, staffing and costs during the past two years;
  - (8) a summary PTSD performance score which evaluates each VISN on its delivery of both inpatient and outpatient PTSD services;
  - (9) the characteristics of patients treated in VA's specialized outpatient PTSD programs;
  - (10) for the second half of the fiscal year, the percentage of veterans who served in the US military since September 11, 2001, in Afghanistan or Iraq, or ever served in a peace-keeping operation, reported for the specialized outpatient treatment programs;
  - (11) outcomes of PTSD treatment in specialized intensive programs;
  - (12) the total number of outpatients treated for PTSD in the VA system broken out by whether they received treatment in a specialized PTSD program (67,955), from a PTSD specialist (16,158), from a mental health program other than the above (138,836), or from a non-mental health program (24,031) [see Appendix E].

For ease of reference, Appendix B presents the goals for the Special Emphasis Programs for PTSD as introduced in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*, and as modified subsequently with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters.

PTSD is one of the most prevalent of war-related illnesses. Providing high quality treatment for PTSD will remain a top priority for VA as it builds on the clinical experience and expertise it has developed during the past decade. The data presented here suggest considerable variability across VISNs in the delivery of some PTSD services. It is the task of thoughtful planning, performance assessment, and clinical care to assure that, as VA passes through a period of major change during the years to come, the treatment provided to veterans with PTSD is equitably distributed, accessible, effective and, efficient.

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## ***Treatment of Posttraumatic Stress Disorder in the Department of Veterans Affairs***

In the decades since the end of the Vietnam conflict, the treatment of veterans suffering from war-related Posttraumatic Stress Disorder (PTSD) has become a major priority for the Department of Veterans Affairs (VA) Health Care System. With both clinical recognition and clear scientific demonstration that the effects of war zone trauma can be long lasting and severe (Wilson & Raphael, 1994; Kulka et al., 1990), VA has increasingly directed substantial clinical, educational, and research resources towards treatment of the only psychiatric illness directly related to war-zone experience.

For many thousands of veterans, PTSD is a chronic disorder resulting directly from their military service that causes substantial psychological suffering and social disability. The national network of specialized PTSD programs that has been established by VA is unique in the world. Studies have shown that veterans are very well pleased with the services received, significantly more so than they are with services from nonspecialized psychiatry programs (Fontana & Rosenheck, 1996a). The availability of specialized PTSD programs is an important indicator of the quality of health care provided by VA. At the close of FY 2004, VA's Specialized Outpatient PTSD Programs (SOPPs) totaled 105 clinical teams: 96 PTSD Clinical Teams (PCTs), 4 Substance Use PTSD Teams (SUPTs) and 5 Women's Stress Disorder Treatment Teams (WSDTTs). At the close of FY 2004, VA's Specialized Intensive PTSD Programs (SIPPs) consisted of 3 Evaluation and Brief Treatment Units (EBTPUs), 14 PTSD Residential Rehabilitation Programs (PRRPs), 8 PTSD Day Hospitals, 7 PTSD Domiciliary (PTSD Dom), 5 Specialized Inpatient PTSD Units (SIPUs), and 1 Women's Trauma Recovery Program (WTRP). The central mission of these teams as defined by Central Office and the VA Special Committee on PTSD is to provide specialized PTSD treatment services to underserved veterans with PTSD due to military-related trauma.

Since 1988, the Northeast Program Evaluation Center, which also serves as the Evaluation Division of the National Center for PTSD, has been monitoring and evaluating the implementation and performance of specialized VA programs for the treatment of military-related PTSD under the auspices of VA's Strategic Health Care Group for Mental Health (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995-2003; Fontana & Rosenheck, 1994, 1996a; Rosenheck & Fontana, 1994a, 1994b, 1996).

## ***Reorganization of the Veterans Health Administration (VHA)***

In October 1995, the Veterans Health Administration (VHA) of VA underwent a major reorganization into 22 semi-autonomous Veterans Integrated Service Networks (VISNs) (Kizer, 1995). In 2002, VISNs 13 and 14 were combined to form VISN 23. All of the VISNs are charged with developing cost-effective health care programs that are responsive to both the national mission of the Department of Veterans Affairs and to local circumstances and trends in health care service delivery. The implementation of the VA reorganization, and the anticipation of possible budget reductions during the coming years, has stimulated a major review of VA health care programs (mental health programs among them) at the VAMC, VISN, and national levels. The shift of the locus of service from costly inpatient programs to more accessible

outpatient and community-based clinics has been identified as a national corporate goal and is emerging as a major goal of planning at the VISN level.

Organizational change is invariably a complex and difficult process. Clear, accurate and relevant data are essential to the success of such a process. In this summary report we have assembled a variety of types of information on the operation of VA's PTSD treatment programs to aid clinicians and administrators at various stages of planning for the future of VA treatment of PTSD.<sup>1</sup>

### ***Structure, Process and Outcome in the Evaluation of Health Care Service Delivery***

The evaluation of health care systems has been conceptualized as assessing three dimensions of care: (1) structure, the resources needed to provide care, (2) process, the delivery of services, and (3) outcome, the impact of treatment on the well-being of patients (Donabedian, 1988). The data presented in sections I - III of this report primarily focus on structure and process of treatment and on population-based rates of service utilization. Outcome has been addressed extensively in previous and ongoing studies conducted at NEPEC, and in Part IV of this report. The first of these studies addressed the performance of VA's PTSD Clinical Teams in considerable breadth and depth (Fontana, Rosenheck & Spencer, 1990, 1991, 1993; Fontana, Rosenheck, Spencer, & Gray, 1995; Fontana & Rosenheck, 1996a). Evaluation data showed that the programs were serving their intended target population and that treatment was associated with significant improvement in PTSD symptoms and other life domains. Further, a major study of the cost and effectiveness of different approaches to inpatient PTSD treatment has been published (Fontana & Rosenheck, 1996a, 1997a; Rosenheck & Fontana, 1995b). In addition, a comprehensive outcome monitoring system was implemented in 1993 for specialized intensive PTSD treatment at 62 VA medical centers (Fontana & Rosenheck, 1997b). Currently, there are 38 specialized intensive PTSD programs.

A recent discussion of health care performance assessment in cardiac surgery in VA has refocused attention solely from the "tyranny of outcomes" (Berwick, 1988) to the fact that outcomes can only be influenced by changes in clinical process and clinical structures (Hammermeister et al., 1995). There is thus, substantial need for basic information on the structure and process of PTSD treatment, in addition to data on outcome performance. Issues of basic structure and program design are especially important since they have the greatest impact on total service costs. With anticipated reductions in Medicare and Medicaid funding and the growth of the number of Americans without health care coverage continuing at a rate of 1 million persons per year, VA will become the provider of last resort for an increasing number of veterans. This is especially true in the mental health area, in which major reductions in funding for State Mental Health Agencies have been under way for several years. It will be important to maximize the efficiency of service delivery if VA is to expand its treatment capacity to help the growing number of eligible veterans for whom it is the provider of last resort.

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<sup>1</sup> This report is part of a larger effort to provide VA managers with data on performance in the mental health area and is part of a more general National Mental Health Program Performance Monitoring system that addresses the core aspects of VA mental health care, including both specialized and non-specialized programs (Greenberg & Rosenheck, 2003).



A national survey of veterans examined why veterans chose to use VA services and found that while 19.4% of VA system users reported low cost as the main reason, the second largest proportion (18.4%) chose VA because it "provided services not found elsewhere" (US Department of Veterans Affairs, 1995, p. 53). Several other studies have found that veterans with war zone service (Rosenheck & Massari, 1993) and, more specifically, Vietnam veterans with PTSD (Rosenheck & Fontana, 1995a) are significantly more likely to use VA rather than non-VA mental health services. VA services for PTSD are thus likely to be in high demand during the coming years and major efforts are needed to assure that services are available to the greatest extent possible.

## **PART I: AN OVERVIEW OF VA TREATMENT OF PTSD**

### ***Population Characteristics***

Table 1 presents basic information on the population of veterans in each VISN, the number and proportion who are service connected for a psychiatric disorder, and who are specifically service connected for PTSD. More detailed data on sociodemographic characteristics of veterans in each VISN are available in the report on the full mental health monitoring system (Greenberg & Rosenheck, 2003).

Additional data on the use of VA mental health services among all veterans and, more specifically, among those service-connected for PTSD are also presented in Table 1. Here, too, variations in population coverage between VISNs are modest, as evidenced by the small coefficients of variation (the standard deviation of the mean of all VISNs divided by the mean of all VISNs). Outlier values are defined as those that are 1 standard deviation or more below the mean of all VISNs, reflecting especially low population coverage, and are indicated by being framed in Table 1.<sup>2</sup>

### ***Specialized Treatment Programs for PTSD in VA***

The initial task for system planners is to identify the location and distribution of existing programs. VA programs that treat patients with PTSD can be divided into two types: general psychiatry programs and "specialized programs." General programs are standard VA inpatient and outpatient programs that treat veterans with PTSD in the same settings in which they treat veterans with other mental health problems. The "specialized programs" are staffed by experts who have concentrated their clinical work in the area of PTSD treatment. Such specialization has long been recognized as an essential feature in treatment of war-related PTSD. Treatment of PTSD requires specific familiarity with the kinds of trauma veterans encountered in various US wars, and special skills and experience to address the effects of these traumas.

Tables 2-3 present summary information on the number and types of specialized PTSD programs in each VISN and at each medical center. VISNs with especially small numbers of specialized programs are framed in Table 2. Table 2a shows changes from FY 2003- FY 2004 in the number of programs operating in each VISN. The change in number of programs shows a net loss of 1 PCT, 1 SUPT, and a gain of 1 PTSD Day Hospital. Additional data on changes in program staffing are presented in Part III of this report. Table A1 in Appendix A shows changes from FY 1995 to FY 2004 in the number of programs operating in each VISN.

Tables 4-5 present data on FY 2004 expenditures by VISN and by each program. Fiscal data presented in Tables 4 and 5 reflect expenditure of special Congressionally appropriated funds along with locally generated funds for PTSD treatment as reported by each medical center

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<sup>2</sup>One standard deviation is used as the criterion for identifying outliers throughout Part I. Since most comparisons reported here are one-tailed, one standard deviation or more identifies the extreme 15% of each distribution.

in its Annual Specialized PTSD Report to NEPEC. These data are combined in Table 4 with population data to evaluate population-based per capita spending on specialized PTSD treatment in each VISN. While these funds account for the great majority of expenditures on specialized PTSD outpatient programs, they often constitute only part of the funding of inpatient, including residential, programs.

In past reports, Table 6 presented data from VA's Cost Distribution report (CDR) on all VA expenditures for inpatient PTSD programs (including both locally allocated funds and funds allocated by a peer review process from special Congressionally appropriated funds). Although separate cost centers for these programs were initiated in FY 1994, many sites have not fully used these cost centers in their CDR distributions. As a result, substantial discrepancies have been observed in some instances between total funding as reported on the CDR, and total funding as reported in annual program reports to NEPEC. CDR data were presented in the Long Journey Home reports in the past, in part, to stimulate more careful reporting of expenditures in the proper cost accounts in the CDR. Unfortunately, incongruities between the CDR reports and the annual program reports continue to exist. For this reason, Table 6 is no longer included in the report.

### ***Specialized PTSD Outpatient Programs***

Tables 7 through 8 present summary data on the workload of specialized PTSD outpatient clinics: the PTSD Clinical Teams (PCT) program, the Substance Use PTSD Teams (SUPT) program, and the Women's Stress Disorder Treatment Teams (WSDTT) program. Table 7 presents basic information from computerized VA workload data (the outpatient file) on the number of veterans seen, the number of visits received, and the number of visits per veteran in each VISN. Data are also presented (Table 7a) on workload changes from FY 2003 to FY 2004. Overall these programs saw a 12.1% increase in veterans in FY 2004. The intensity of contact increased as evidenced by an increase of 7.7% in number of visits. Table A2 in Appendix A presents summary workload data and the changes from FY 1995 to FY2004.

Table 8 presents workload data for specialized PTSD programs by medical center within each VISN. Teams that saw especially low numbers of veterans in FY 2004, or that delivered low intensity services, are framed.

### ***Inpatient and Residential Treatment of PTSD***

As noted above, inpatient treatment of PTSD in VA takes place in both specialized programs for PTSD and general psychiatry programs. In this section we first present data on inpatient and residential PTSD treatment overall, without differentiating various types of specialized programs. Data on specialized programs are presented subsequently.

*Census Data.* Tables 9 and 10 present data from the FY 2004 end-of-year national census of VA inpatients (conducted on patients hospitalized at midnight on September 30). Table 9

presents data on the number of occupied general psychiatry beds<sup>3</sup> in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data are also presented on the number of occupied domiciliary and PRRP beds in each VISN and the number and proportion of beds occupied by patients whose primary diagnosis is PTSD (ICD-9 code 309.81). Data on the length of stay are presented for these patients *up to the time of the census*.<sup>4</sup> Since these are one-day cross-sectional data it should be borne in mind that they weight data from long-stay patients more heavily than data that averages care delivered during the entire year (e.g., the data presented in Tables 11, 11-2, 12, and 12-2). VISNs with especially long lengths of stay for PTSD (1 standard deviation or more above the mean of all VISNs) are signaled by bolding/underlining. Table 9 also presents population data on beds per capita among eligible veterans in the general population. VISNs with especially high numbers of beds per capita occupied by PTSD patients are bolded/underlined, while VISNs with especially low numbers of PTSD beds per capita are framed. While the advantage of census data is that they present information on occupied beds, the representativeness of a one-day sample is limited. Additional information is available, however, from the discharge abstract file -- the Patient Treatment File (PTF). Table 9a presents data on changes from FY 2003-FY 2004 in beds devoted to PTSD treatment. There was a 1.9% decline in the total number of general psychiatry beds in VA; a 5.4% decrease in the proportion of general psychiatry beds used for PTSD treatment; and a 24.3% decrease in average length of stay. There was an 1.3% decrease in the total number of domiciliary and PRRP beds in VA; a 3.5% increase in the proportion of domiciliary and PRRP beds used for PTSD treatment; and a 13.7% decrease in average length of stay. Additional data are presented in Table A3 in Appendix A.

*Discharge Abstract Data.* Tables 11 through 12-2 present data on all completed episodes of inpatient, domiciliary, and PRRP treatment in FY 2004. Data are presented on the total number of discharges for all diagnoses, and average length of stay<sup>5</sup>. In Table 11, the first four columns present data on the unique (unduplicated) veterans treated and their cumulative bed days of care during the year. The next two columns present the proportion of all episodes of care and the proportion of all unique veterans who received inpatient treatment for PTSD. VISNs treating especially low proportions of PTSD patients are indicated by framed values; however, for FY 2004 there were no outliers. The next series of columns present data on average length of stay, and cumulative days per veteran per year for PTSD treatment. VISNs with long stays and high bed days of care for inpatient utilization are marked by bolding/underlining.

The next pair of columns presents data on the *ratio* of average length of stay and cumulative bed days of care for PTSD to average length of stay and cumulative bed days of care

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<sup>3</sup> Bed section codes 70-71, 75-79, 89 and 91-93. Domiciliary, PRRP and Hoptel care are not included.

<sup>4</sup> These data are truncated at 365 days to reflect care delivered during FY 2004 only.

<sup>5</sup> These measures are also truncated at 365 days, as are the cumulative bed days of care, described below. Very few PTSD patients have such long lengths of stay, minimizing censoring problems in these data.

for all general psychiatry patients. These ratios reflect systematic differences in patterns of inpatient care for PTSD as compared to inpatient care for all psychiatric disorders. High values are marked by bolding/underlining. Finally, Table 11-2 presents data on the number of episodes of PTSD treatment per Category A veteran in the general population, for each VISN. Equivalent data are presented by VAMC in Tables 12 and 12-2 (although population-based treatment estimates are not available for individual medical centers).

Tables 11a and 11b present data on the change from, FY 2003 to FY 2004, in the number and percent of patients receiving treatment for PTSD in general psychiatry inpatient beds and PRRP and domiciliary beds. VA provided a total of 6,823 episodes of inpatient treatment for PTSD in FY 2003 compared to 6,597 in FY 2004, a 3.3% decrease. The average length of stay of 15.5 in FY 2004 increased slightly from 15.2 in FY 2003. A total of 3,766 episodes of domiciliary and PRRP treatment for PTSD was provided in FY 2003 compared to 3,792 in FY 2004, a 0.7% increase. Average length of stay increased from 58.7 in FY 2003 to 59.1 in FY 2004. Additional data are presented in Tables A4 and A5 in Appendix A.

### ***Specialized Inpatient PTSD Programs***

Tables 2 and 3 presented data on the distribution of five different types of inpatient and residential PTSD programs in VA; the Specialized Inpatient PTSD Unit (SIPU); the PTSD Domiciliary (PTSD Dom), the PTSD Day Hospital (PTSD DH), the PTSD Residential Rehabilitation Program (PRRP) and the Evaluation and Brief Treatment PTSD Unit (EBTPU). In this section we present additional information on these specialized programs from annual program summaries submitted to NEPEC.

As with Table 6, Table 13 is no longer being presented. Table 13 contained data on the number of operating beds and the number of admissions to specialized programs, based on data from annual report submissions to NEPEC. Additional data were presented from the CDR report of the current fiscal year. As noted with Table 6, many medical centers have not yet fully implemented procedures for accurately distributing costs to specific PTSD programs on the CDR. As this is case, Table 13 is not included in this report.

### ***Performance Data on PTSD Treatment in VA***

Tables 14-20 present performance assessment data on VA treatment of PTSD, by VISN and by VAMC. These data address both inpatient and outpatient care provided to an unduplicated sample of *all* veterans discharged from general psychiatry inpatient units (which include the specialized inpatient PTSD units) with a primary diagnosis of PTSD between October 1, 2003 and March 31, 2004.<sup>6</sup> The monitors focus on service use and outcomes during the six months after the initial discharge. These measures are based on those used to evaluate performance in all VA mental health programs and are described more fully in VA's National Mental Health Program Performance Monitoring System (Greenberg & Rosenheck, 2003).

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<sup>6</sup> These data thus differ from those presented above in that they are based on a more intensively studied sample, which includes only veterans discharged during the first half of the fiscal year, about half of the unique veterans whose care was addressed in Tables 11-12.

*Inpatient Performance.* Tables 14 and 15 present data on inpatient care, by VISN and by VAMC, that include:

- (1) the number of unduplicated veterans discharged with a diagnosis of PTSD,
- (2) the average length of stay of the index episode,
- (3) bed days of psychiatric care during the six months after discharge,
- (4) the change in bed days of psychiatric care from the six months before discharge to the six months after discharge,
- (5) the number of additional psychiatric hospital discharges during the six months after the index discharge,
- (6) readmission rates to general psychiatry bed sections at 14 days, 30 days and 180 days, after discharge, and
- (7) the number of days to first readmission among those readmitted to psychiatry bed sections.

Outlier performance is defined, for descriptive purposes, as any value that is 1 standard deviation or more from the mean of all VISNs (and all VAMCs, where indicated). Such outliers are identified in Tables 14 and 15 by framed values. A summary inpatient performance score for each VISN is derived by averaging the standard scores across all measures (see last column of Table 14).<sup>7</sup>

*Outpatient Performance.* Tables 16 and 17 present data on outpatient care among discharged veterans, by VISN and by VAMC, that include:

- (1) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 6 months following discharge,
- (2) the proportion of discharged veterans who received any VA outpatient general psychiatric treatment during the 30 days following discharge,
- (3) the number of days from discharge to the first general psychiatric visit during the six months after the index discharge, among those with at least one such visit,

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<sup>7</sup>These standard scores are z-scores, the site mean less the average of all site means divided by the standard deviation of all site means. Some measures are weighted more heavily in these averages than others, based on their importance and independence of other measures. Measures that address common factors (such as the readmission rates at 14, 30 and 180 days) are combined to form one measure in the overall average. For a full explanation of methods used for combining performance measures see Rosenheck & DiLella, 1998.

- (4) the number of general psychiatric visits received by veterans who received at least one visit during the 6 months following discharge,
- (5) continuity of care, as measured by the number of two month periods (during the first six months after discharge) in which the veteran received two or more general psychiatry outpatient visits,
- (6) the proportion of veterans with a secondary diagnosis of alcohol or drug abuse in addition to their primary diagnosis of PTSD,
- (7) receipt of any substance abuse services during the six months following discharge,
- (8) the ratio of the proportion of veterans who received substance abuse treatment to the proportion who were dually diagnosed, and
- (9) the number of substance abuse outpatient services received during those six months among those who received any outpatient substance abuse services.<sup>8</sup>

Outlier performances are defined, as above, as a mean performance that is 1 standard deviation or more from the mean of all VISNs or all VAMCs and are identified in Tables 16 and 17 by framed values. As above, a summary outpatient performance score is derived by averaging the standard scores across all pertinent measures and is presented in the last column of Table 16 (see note 8, for details).

*Outpatient Continuity of Care.* Tables 16A-16B and Tables 17A-17B present a series of monitors that address continuity of care provided to outpatients with PTSD within the outpatient treatment setting. Thus, in contrast to the conventional HEDIS measures that evaluate the timeliness of entry into outpatient treatment following discharge from the hospital, these measures address continuity of care among patients with PTSD during the six months following their first outpatient visit in each fiscal year. These address the number of visits, the distribution of those visits across time, and the number of different providers involved. It is assumed that seriously mentally ill patients are best served by having regular contacts with the same provider over an extended period of time.

Continuity of care is widely regarded as a crucial ingredient in the treatment of patients with severe mental illness (Bachrach, 1981). A recent review of the literature on continuity of care for people with severe mental illness identified two broad components of continuity of care for such patients: (1) a cross sectional component involving adequate communication between providers and access to a comprehensive array of needed services; and (2) a longitudinal component involving continuous contact over time, constancy of service providers, continuity through

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<sup>8</sup> General psychiatry outpatient visits (which include visits to specialized PTSD outpatient programs) are defined by outpatient file stop codes 501-506; 509-510; 515-516, 520-521, 525, 529, 531, 540-541; 550-554, 557-558; 561-563; 573-578; and 580-581. Substance abuse outpatient visits are defined by stop codes 507-508; 513-514; 517-519; 522-523; 555-556, 560.

discharges and transfers and implementation of service plans (Johnson S. et al., 1997). We have developed a series of measures that specifically address several aspects of the longitudinal component of continuity of care.

The sample examined for this monitor includes all veterans who had at least two visits in a specialty outpatient clinic (500 series DSS identifier) in which the primary diagnosis was PTSD (ICD 9 code 309.81). Data were then compiled from the encounter forms on all mental health specialty visits and all unique providers seen by the veteran during the 6 months following the first contact of the year. These data were used to construct indicators that reflect: (1) the number of outpatient visits, (2) the number of different days on which the veteran had an outpatient visit; (3) the number of two-month periods in which the veteran had 2 or more visits (range 0-3); (4) the number of months in which the veteran had one mental health visit; and (5) whether the veteran concluded treatment, defined operationally as having no specialty mental health visits for 6 months. In addition two composite indices of continuity of care based on both the number of visits and the number of providers were constructed. The first of these measures, (6) the Continuity of Care (COC) index is based in the following formula developed by Bice and Boxerman (1977):

$$COC = \frac{\sum_{j=1}^s n_j^2 - n}{n(n-1)}$$

where n equals the total number of visits and  $n_j$  is the total visits to the  $j^{th}$  provider.

This measure generates a continuity of care score from 0-1, with one representing more visits with fewer providers and zero represents few visits with each of several providers.

The second index (7) is the Modified Modified Continuity Index (MMCI) developed by Magill and Senf (1987):

$$MMCI = \frac{1 - (n \text{ of providers} / [n \text{ of visits} + 0.1])}{1 - (1 / [n \text{ of visits} + 0.1])}$$

This index takes a somewhat different approach to calculating a measure based on a 0-1 scale in which one represents more visits with fewer providers and zero represents few visits with numerous providers. After risk adjustment for patient demographic and diagnostic characteristics, standardized scores of these seven measures are averaged to represent an overall index of continuity of care among seriously mentally ill VA outpatients receiving services from specialty mental health clinics.



### ***Overall PTSD Performance Score***

An overall PTSD performance score is presented in Table 18. This score averages the two summary outpatient scores (for which desirable performance is in the positive direction) from Table 16 and Table 16A, with the negative of the inpatient score presented in Table 14. The sign of the inpatient score is reversed because the direction of desirable performance on the inpatient summary score presented in Table 14 is in the negative direction. Positive scores on the overall inpatient and outpatient PTSD performance score thus reflect high outpatient service provision/outcome and low inpatient service provision/outcome while negative scores reflect the opposite -- high levels of inpatient utilization/outcome and readmission, and low outpatient service delivery -- a pattern which runs counter to VA corporate goals (Kizer, 1995).

### ***Out-of-VISN Treatment***

As a result of their specialized focus, PTSD programs sometimes treat patients who reside in other VISNs. Tables 19 and 20 present data on the proportion of veterans who received treatment for PTSD, and who resided in the VISN in which they were treated. For comparison, data are also presented on the proportion of such "in-VISN" veterans among those who were discharged from general psychiatry units but whose primary diagnosis was not PTSD, and among those who were discharged from substance abuse units.

### ***Treatment of PTSD Inside and Outside of Specialized Programs***

For ease of reference, Appendix E presents information regarding differentiation of treatment in different types of settings as specified in VHA Directive 2000-004, "Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services". This directive delineates the types of outpatient PTSD services available in VA.

Appendix E Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD receiving outpatient PTSD treatment in the VA system broken out by whether they received treatment in a specialized outpatient PTSD program, from a PTSD specialist, from a mental health program other than the above, or from a non-mental health program, by VISN, for FY 2004. Tables E2 and E3 present the total number of veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD specialists by VISN and by facility, respectively, and the number of visits those veterans received, for FY 2004. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2004.

Table 1. Veteran Population Characteristics and Use of VA Services: FY 2004

VISN	Total Vet Population 1990	Total Vet Population 2000	Service Connected Illness				Used VA MH Services		
			% SC-Any		% SC-		% Veterans SC		
			All Psych	Psych	PTSD	PTSD	All psych	SC PTSD	for PTSD
1	1,500,892	1,327,933	31,445	2.37%	14,115	1.06%	40,424	8,604	61.0%
2	697,421	617,040	12,198	1.98%	5,721	0.93%	21,281	3,660	64.0%
3	1,595,593	1,230,989	26,225	2.13%	10,457	0.85%	33,246	6,368	60.9%
4	1,819,870	1,635,354	27,138	1.66%	12,162	0.74%	41,735	7,535	62.0%
5	857,564	827,066	10,718	1.30%	4,846	0.59%	20,955	2,950	60.9%
6	1,251,189	1,383,878	26,396	1.91%	13,217	0.96%	43,488	8,371	63.3%
7	1,367,528	1,501,145	29,235	1.95%	15,189	1.01%	50,604	9,990	65.8%
8	1,634,357	1,935,726	43,858	2.27%	14,470	0.75%	74,787	9,240	63.9%
9	1,060,416	1,099,248	22,934	2.09%	11,358	1.03%	36,627	7,052	62.1%
10	1,151,473	1,066,077	16,212	1.52%	6,281	0.59%	38,141	3,940	62.7%
11	1,651,186	1,533,351	18,427	1.20%	6,750	0.44%	34,646	4,068	60.3%
12	1,362,314	1,221,864	15,713	1.29%	6,944	0.57%	31,268	4,377	63.0%
15	1,071,604	1,030,765	16,677	1.62%	8,335	0.81%	34,091	5,390	64.7%
16	1,887,301	1,946,911	45,271	2.33%	24,429	1.25%	75,705	14,404	59.0%
17	1,026,699	1,092,479	21,746	1.99%	11,757	1.08%	37,462	7,237	61.6%
18	842,132	948,529	20,706	2.18%	12,353	1.30%	36,446	7,482	60.6%
19	731,842	799,369	13,899	1.74%	7,897	0.99%	23,028	4,576	57.9%
20	1,191,422	1,248,708	27,605	2.21%	18,129	1.45%	41,049	9,677	53.4%
21	1,418,772	1,280,265	23,824	1.86%	14,778	1.15%	36,525	8,343	56.5%
22	1,841,007	1,638,730	24,533	1.50%	12,558	0.77%	47,091	6,774	53.9%
23	1,223,080	1,184,277	19,895	1.68%	9,797	0.83%	35,384	5,951	60.7%
ALL VA	27,183,662	26,549,704	494,655	1.86%	241,543	0.91%	833,983	145,989	60.4%
Average	1,294,460	1,264,272	23,555	1.85%	11,502	0.91%	39,713	6,952	60.9%
SD	352,565	340,020	8,797	0.35%	4,534	0.25%	13,656	2,629	3.2%
CV	0.27	0.27	0.37	0.19	0.39	0.28	0.34	0.38	0.05

\* Outlined values are 1 SD below the mean of all VISNs and indicate VISNs with low population coverage.

# Percentages based on total veteran population in the VISN.

Table 2. SPECIALIZED PTSD PROGRAMS, BY VISN: FY 2004.

VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	SUM VISN
1	5	1	1	0	2	0	1	1	0	11
2	3	0	0	0	1	0	0	0	0	4
3	5	0	0	0	0	2	0	0	0	7
4	3	1	0	0	0	0	2	0	0	6
5	3	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	7
7	6	0	0	0	0	0	0	0	0	6
8	5	0	0	0	0	1	1	0	0	7
9	5	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	9
11	5	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	6
15	5	0	0	0	0	0	0	1	0	6
16	9	0	1	0	0	1	2	0	0	13
17	5	0	0	0	0	0	1	0	0	6
18	4	0	0	1	0	0	0	0	0	5
19	3	0	0	0	1	0	0	0	0	4
20	4	0	0	2	0	1	0	1	0	8
21	4	1	0	0	0	0	2	0	1	8
22	5	0	1	0	0	0	0	0	0	6
23	5	1	0	0	0	0	2	0	0	8
ALL VA	96	4	5	3	8	7	14	5	1	143
AVERAGE	5	0	0	0	0	0	1	0	0	7
SD	1.43	0.40	0.44	0.48	0.80	0.58	0.86	0.54	0.22	2.18

Data Source: Annual Report for Specialized PTSD Programs, FY 2004

Note: Outlined values are 1 SD below the mean of all VISNs, and indicate VISNs with low numbers of Specialized PTSD programs.

Legend:

PCT = PTSD Clinical Team

SUPT = Substance Use PTSD Team

WSDTT = Women's Stress Disorder Treatment Team

EBTPU = Evaluation &amp; Brief Treatment Unit

PTSD DH = PTSD Day Hospital

PTSD DOM = PTSD Domiciliary

PRRP = PTSD Residential Rehabilitation Program

SIPU = Specialized PTSD Inpatient Unit

WTRP= Women's Trauma Recovery Program

Table 2a. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 2003, FY 2004 and FY 2004-2003 change.

Fiscal Year 2004										
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	SUM VISN
1	5	1	1	0	2	0	1	1	0	11
2	3	0	0	0	1	0	0	0	0	4
3	5	0	0	0	0	2	0	0	0	7
4	3	1	0	0	0	0	2	0	0	6
5	3	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	7
7	6	0	0	0	0	0	0	0	0	6
8	5	0	0	0	0	1	1	0	0	7
9	5	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	9
11	5	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	6
15	5	0	0	0	0	0	0	1	0	6
16	9	0	1	0	0	1	2	0	0	13
17	5	0	0	0	0	0	1	0	0	6
18	4	0	0	1	0	0	0	0	0	5
19	3	0	0	0	1	0	0	0	0	4
20	4	0	0	2	0	1	0	1	0	8
21	4	1	0	0	0	0	2	0	1	8
22	5	0	1	0	0	0	0	0	0	6
23	5	1	0	0	0	0	2	0	0	8
ALL VA	96	4	5	3	8	7	14	5	1	143
AVERAGE	5	0	0	0	0	0	1	0	0	7
SD	1.43	0.40	0.44	0.48	0.80	0.58	0.86	0.54	0.22	2.18

Fiscal Year 2003										
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	SUM VISN
1	5	2	1	0	1	0	1	1	0	11
2	3	0	0	0	1	0	0	0	0	4
3	5	0	0	0	0	2	0	0	0	7
4	3	1	0	0	0	0	2	0	0	6
5	3	0	0	0	1	1	0	0	0	5
6	5	0	0	0	0	0	0	2	0	7
7	6	0	0	0	0	0	0	0	0	6
8	5	0	0	0	0	1	1	0	0	7
9	5	0	0	0	0	0	0	0	0	5
10	5	0	1	0	3	0	0	0	0	9
11	5	0	0	0	0	0	1	0	0	6
12	2	0	1	0	0	1	2	0	0	6
15	5	0	0	0	0	0	0	1	0	6
16	7	0	1	0	0	1	2	0	0	11
17	5	0	0	0	0	0	1	0	0	6
18	4	0	0	1	0	0	0	0	0	5
19	4	0	0	0	1	0	0	0	0	5
20	4	0	0	2	0	1	0	1	0	8
21	4	1	0	0	0	0	2	0	1	8
22	5	0	1	0	0	0	0	0	0	6
23	7	1	0	0	0	0	2	0	0	10
ALL VA	97	5	5	3	7	7	14	5	1	144
AVERAGE	5	0	0	0	0	0	1	0	0	7
SD	1.24	0.54	0.44	0.48	0.73	0.58	0.86	0.54	0.22	1.98

Change in Number of Programs										
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	SUM VISN
1	0	-1	0	0	1	0	0	0	0	0
2	0	0	0	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0	0	0	0
4	0	0	0	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0	0	0	0
6	0	0	0	0	0	0	0	0	0	0
7	0	0	0	0	0	0	0	0	0	0
8	0	0	0	0	0	0	0	0	0	0
9	0	0	0	0	0	0	0	0	0	0
10	0	0	0	0	0	0	0	0	0	0
11	0	0	0	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0	0	0	0
15	0	0	0	0	0	0	0	0	0	0
16	2	0	0	0	0	0	0	0	0	2
17	0	0	0	0	0	0	0	0	0	0
18	0	0	0	0	0	0	0	0	0	0
19	-1	0	0	0	0	0	0	0	0	-1
20	0	0	0	0	0	0	0	0	0	0
21	0	0	0	0	0	0	0	0	0	0
22	0	0	0	0	0	0	0	0	0	0
23	-2	0	0	0	0	0	0	0	0	-2
ALL VA	-1	-1	0	0	1	0	0	0	0	-1

Data Source: Annual Report for Specialized PTSD Programs, FY 2004

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2004: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VAMC
1	Boston HCS	523	2	1*	1								3
1	Connecticut HCS	689	1	1					1				3
1	Manchester	608	1*										0
1	Northampton	631								1			1
1	Providence	650	1										1
1	Togus	402					1						1
1	White River Junction	405	1				1						2
2	Canandaigua	528A5	1										1
2	Syracuse	528A7	1										1
2	Western New York HCS	528A4	1				1						2
3	Bronx	526	1										1
3	Hudson Valley HCS	620/620A4	1					1					2
3	New Jersey HCS	561	1					1					2
3	New York Harbor HCS	630/630A4	2										2
4	Clarksburg	540							1				1
4	Coatesville	542	1						1				2
4	Philadelphia	642	1										1
4	Pittsburgh HCS	646A5	1	1									2
5	Martinsburg	613						1					1
5	Maryland HCS	512	2				1						3
5	Washington	688	1										1
6	Asheville	637	1										1
6	Durham	558	1										1
6	Fayetteville (NC)	565	1										1
6	Hampton	590	1										1
6	Salem	658								1			1
6	Salisbury	659	1							1			2
7	Atlanta	508	1										1
7	Augusta	509	1										1
7	Birmingham	521	1										1
7	Central Alabama Veterans HCS	619A4	1										1
7	Charleston	534	1										1
7	Dublin	557	1										1
8	Bay Pines	516	1					1					2
8	Miami	546	1						1				2
8	No. Florida/So. Georgia Veterans HCS	573	1										1
8	San Juan	672	1										1
8	Tampa	673	1										1

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2004: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VAMC
9	Huntington	581	1										1
9	Lexington	596	1										1
9	Louisville	603	1										1
9	Memphis	614	1										1
9	Mountain Home	621	1										1
10	Brecksville	541	1		1		1						3
10	Chillicothe	538	1										1
10	Cincinnati	539	1				1						2
10	Columbus	757	1										1
10	Dayton	552	1				1						2
11	Ann Arbor HCS	506	1										1
11	Battle Creek	515	1						1				2
11	Danville	550	1										1
11	Northern Indiana HCS	610/610A4	2										2
12	Chicago HCS	537	1										1
12	Hines	578	1										1
12	Madison	607			1								1
12	Milwaukee	695						1					1
12	North Chicago	556							1				1
12	Tomah	676							1				1
15	Eastern Kansas HCS	589A5	1							1			2
15	Kansas City	589	1										1
15	Poplar Bluff	657A4	1										1
15	St. Louis	657	1										1
15	Wichita	589A7	1										1
16	Central Arkansas Veterans HCS	598	1					1					2
16	Fayetteville (AR)	564	1										1
16	Gulf Coast Veterans HCS	520	1										1
16	Houston	580	1										1
16	Jackson	586	1						1				2
16	Muskogee	623BY	1										1
16	New Orleans	629	1		1				1				3
16	Oklahoma City	635	1										1
16	Shreveport	667	1										1
17	Central Texas Veterans HCS	674	3						1				4
17	North Texas HCS	549	1										1
17	South Texas Veterans HCS	671	1										1
18	El Paso Veterans HCS	756	1										1
18	New Mexico HCS	501	1										1
18	Phoenix	644	1										1
18	Southern Arizona HCS	678	1			1							2

Table 3. VA SPECIALIZED PTSD PROGRAMS: FY 2004: PROGRAM COUNTS BY VAMC.

VISN	FACILITY	STATION NUMBER	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP	OTHER	SUM VAMC
19	Cheyenne	442	1										1
19	Denver	554					1						1
19	Grand Junction	575	1										1
19	Salt Lake City HCS	660	1										1
20	Boise	531	1			1							2
20	Portland	648	1										1
20	Puget Sound HCS	663	1			1		1					3
20	Roseburg HCS	653								1			1
20	Spokane	668	1										1
21	Hilo	459GB							1				1
21	Honolulu	459	1										1
21	Northern California HCS	612	1										1
21	Palo Alto HCS	640	1						1		1		3
21	San Francisco	662	1	1									2
22	Greater Los Angeles HCS	691	2										2
22	Loma Linda	605	1		1								2
22	San Diego HCS	664	1										1
22	Southern NV HCS	593	1										1
23	Black Hills HCS	568		1					1				2
23	Central Iowa HCS	636A6/A7	1						1				2
23	Iowa City	636A8	1										1
23	Minneapolis	618	1										1
23	Nebraska-Western Iowa HCS	636/636A5	2										2
23	Sioux Falls	438	1*										0

Data Source: Annual Report for Specialized PTSD Programs, FY 2004

\* This program closed or reorganized in FY 2004.

Table 4. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VISN, FY 2004.

VISN	Specialized Program FY 2004 Expenditures †			% Intensive/ Outpatient
	Outpatient	Intensive	Total	
1	\$3,270,908	\$1,199,450	\$4,470,358	26.8%
2	\$1,080,587	\$248,333	\$1,328,921	18.7%
3	\$2,801,523	\$2,015,030	\$4,816,553	41.8%
4	\$2,526,683	\$1,964,036	\$4,490,719	43.7%
5	\$1,312,460	\$735,668	\$2,048,127	35.9%
6	\$1,761,847	\$2,169,977	\$3,931,824	55.2%
7	\$3,501,539	\$0	\$3,501,539	0.0%
8	\$2,504,330	\$998,606	\$3,502,936	28.5%
9	\$1,617,600	\$0	\$1,617,600	0.0%
10	\$3,555,468	\$1,058,027	\$4,613,495	22.9%
11	\$1,489,540	\$996,370	\$2,485,910	40.1%
12	\$1,236,523	\$1,647,635	\$2,884,157	57.1%
15	\$1,982,355	\$1,137,156	\$3,119,511	36.5%
16	\$6,518,547	\$1,459,216	\$7,977,764	18.3%
17	\$2,133,193	\$1,431,190	\$3,564,383	40.2%
18	\$2,126,513	\$361,117	\$2,487,630	14.5%
19	\$1,418,630	\$652,102	\$2,070,732	31.5%
20	\$3,699,116	\$2,612,366	\$6,311,482	41.4%
21	\$3,263,598	\$4,647,762	\$7,911,361	58.7%
22	\$2,969,977	\$0	\$2,969,977	0.0%
23	\$3,151,737	\$539,555	\$3,691,291	14.6%
ALL VA	\$53,922,674	\$25,873,598	\$79,796,272	32.4%
AVERAGE	\$2,567,746	\$1,232,076	\$3,799,822	29.8%
SD	\$1,207,107	\$1,054,642	\$1,771,691	17.5%
CV	0.47	0.86	0.47	0.59

Note: No specialized Intensive PTSD Program was opened in VISNs 7, 9 or 22 for this time period.

† Expenditures = "All Other dollars" plus total salary dollars for both centrally-funded and station-funded FTEE as reported in the FY 2004 Annual Report

NA=Not Applicable



Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, OPEN IN FY 2004.

[illegible]

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, OPEN IN FY 2004.

[illegible]

Table 5. SUMMARY OF NATIONALLY ALLOCATED EXPENDITURES FOR SPECIALIZED PTSD PROGRAMS, By VAMC, OPEN IN FY 2004.

[illegible]

Data for TABLE 6 are not available for this fiscal year.
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Table 7. INTENSITY DATA: SOPPs by VISN: FY 2004

SOPPs WORKLOAD				<i>Total Vet Population 1990</i>	<i>Total Vet Population 2000</i>	<i>All VA MH Service Users</i>	Population-Based Workload Pct. MH Users
VISN	Veterans Seen	Visits	Vis/Vet*				
1	4,185	43,519	10.40	1,500,892	1,327,933	40,424	10.4%
2	1,328	12,468	9.39	697,421	617,040	21,281	6.2%
3	3,802	46,496	12.23	1,595,593	1,230,989	33,246	11.4%
4	3,589	30,353	8.46	1,819,870	1,635,354	41,735	8.6%
5	2,262	21,876	9.67	857,564	827,066	20,955	10.8%
6	4,205	27,602	6.56	1,251,189	1,383,878	43,488	9.7%
7	5,130	42,293	8.24	1,367,528	1,501,145	50,604	10.1%
8	3,738	30,279	8.10	1,634,357	1,935,726	74,787	5.0%
9	3,218	19,025	5.91	1,060,416	1,099,248	36,627	8.8%
10	3,606	29,254	8.11	1,151,473	1,066,077	38,141	9.5%
11	2,337	17,110	7.32	1,651,186	1,533,351	34,646	6.7%
12	1,325	14,320	10.81	1,362,314	1,221,864	31,268	4.2%
15	3,067	30,228	9.86	1,071,604	1,030,765	34,091	9.0%
16	11,506	98,875	8.59	1,887,301	1,946,911	75,705	15.2%
17	3,666	29,624	8.08	1,026,699	1,092,479	37,462	9.8%
18	4,469	32,021	7.17	842,132	948,529	36,446	12.3%
19	1,742	11,009	6.32	731,842	799,369	23,028	7.6%
20	6,025	53,291	8.84	1,191,422	1,248,708	41,049	14.7%
21	3,403	34,537	10.15	1,418,772	1,280,265	36,525	9.3%
22	4,548	44,424	9.77	1,841,007	1,638,730	47,091	9.7%
23	3,198	26,813	8.38	1,223,080	1,184,277	35,384	9.0%
ALL VA	80,201	695,417	8.67	25,960,582	26,549,704	833,983	9.6%
AVERAGE	3,826	33,115	8.68	1,294,460	1,264,272	39,713	9.4%
SD	2,120	18,980	1.57	361,272	340,020	13,656	2.7%
CV	0.55	0.57	0.18	0.28	0.27	0.34	0.29

\* Outlined values are 1 SD below the mean of all VISNs and reflect low intensity and low population coverage in outpatient specialized PTSD service delivery.

Table 7a. INTENSITY DATA: SOPPs by VISN: FY 2003, FY 2004 and FY 2004-2003 change.

VISN	FY 2003			FY 2004			% Change: FY 2004- FY 2003		
	SOPP WORKLOAD			SOPP WORKLOAD			SOPP WORKLOAD		
	Veterans Seen	Visits	Vis/Vet*	Veterans Seen	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	4,068	48,710	11.97	4,185	43,519	10.40	2.9%	-10.7%	-13.2%
2	992	10,519	10.60	1,328	12,468	9.39	33.9%	18.5%	-11.5%
3	3,162	39,496	12.49	3,802	46,496	12.23	20.2%	17.7%	-2.1%
4	2,997	24,327	8.12	3,589	30,353	8.46	19.8%	24.8%	4.2%
5	2,174	21,308	9.80	2,262	21,876	9.67	4.0%	2.7%	-1.3%
6	3,622	24,963	6.89	4,205	27,602	6.56	16.1%	10.6%	-4.8%
7	4,359	37,963	8.71	5,130	42,293	8.24	17.7%	11.4%	-5.3%
8	3,635	27,133	7.46	3,738	30,279	8.10	2.8%	11.6%	8.5%
9	3,076	17,307	5.63	3,218	19,025	5.91	4.6%	9.9%	5.1%
10	2,961	26,012	8.78	3,606	29,254	8.11	21.8%	12.5%	-7.7%
11	2,134	17,861	8.37	2,337	17,110	7.32	9.5%	-4.2%	-12.5%
12	1,089	12,681	11.64	1,325	14,320	10.81	21.7%	12.9%	-7.2%
15	2,879	29,780	10.34	3,067	30,228	9.86	6.5%	1.5%	-4.7%
16	9,531	82,865	8.69	11,506	98,875	8.59	20.7%	19.3%	-1.2%
17	3,124	26,690	8.54	3,666	29,624	8.08	17.3%	11.0%	-5.4%
18	4,066	31,387	7.72	4,469	32,021	7.17	9.9%	2.0%	-7.2%
19	2,402	16,396	6.83	1,742	11,009	6.32	-27.5%	-32.9%	-7.4%
20	5,306	50,175	9.46	6,025	53,291	8.84	13.6%	6.2%	-6.5%
21	2,952	34,827	11.80	3,403	34,537	10.15	15.3%	-0.8%	-14.0%
22	4,051	36,855	9.10	4,548	44,424	9.77	12.3%	20.5%	7.4%
23	3,254	28,640	8.80	3,198	26,813	8.38	-1.7%	-6.4%	-4.7%
ALL VA	71,538	645,895	9.03	80,201	695,417	8.67	12.1%	7.7%	-4.0%
AVERAGE	3,421	30,757	9.13	3,826	33,115	8.68	11.5%	6.6%	-4.4%
SD	1,730	15,982	1.83	2,120	18,980	1.57	12.3%	13.0%	6.4%
CV	0.51	0.52	0.20	0.55	0.57	0.18	1.07	1.97	-1.47

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2004.

VISN	FACILITY	PROGRAM	FY 2004		
			# VISITS	# VETS SEEN	VISITS/ VETERANS*
1	BOSTON (MA) HCS: Boston	PCT	6,561	662	9.9
1	BOSTON (MA) HCS: Boston	WSDTT	3,752	279	13.4
1	BOSTON (MA) HCS: Brockton	PCT	6,681	651	10.3
1	CONNECTICUT HCS: West Haven	PCT	8,624	821	10.5
1	CONNECTICUT HCS: West Haven	SUPT	3,288	366	9.0
1	PROVIDENCE, RI	PCT	11,965	1,260	9.5
1	WHITE RIVER JUNCTION, VT	PCT	2,648	456	5.8
2	CANANDAIGUA, NY	PCT	6,210	590	10.5
2	SYRACUSE, NY	PCT	2,930	377	7.8
2	WESTERN NY HCS: Batavia	PCT	3,328	376	8.9
3	BRONX, NY	PCT	11,597	591	19.6
3	HUDSON VALLEY (NY) HCS: Castle Point	PCT	4,638	417	11.1
3	NEW JERSEY HCS: East Orange	PCT	9,653	880	11.0
3	NEW YORK HARBOR HCS: Brooklyn	PCT	10,200	1,152	8.9
3	NEW YORK HARBOR HCS: New York	PCT	10,408	799	13.0
4	COATESVILLE, PA	PCT	9,993	1,066	9.4
4	PHILADELPHIA, PA	PCT	11,759	1,405	8.4
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,397	930	6.9
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,204	224	9.8
5	MARYLAND HCS: Baltimore	PCT	5,837	844	6.9
5	MARYLAND HCS: Perry Point	PCT	4,014	334	12.0
5	WASHINGTON, DC	PCT	12,025	1,194	10.1
6	ASHEVILLE, NC	PCT	3,354	391	8.6
6	DURHAM, NC	PCT	4,757	1,010	4.7
6	FAYETTEVILLE, NC	PCT	5,299	357	14.8
6	HAMPTON, VA	PCT	10,064	1,363	7.4
6	SALISBURY, NC	PCT	4,128	1,104	3.7
7	ATLANTA, GA	PCT	6,900	645	10.7
7	AUGUSTA, GA	PCT	11,565	1,312	8.8
7	BIRMINGHAM, AL	PCT	6,437	1,107	5.8
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,853	824	7.1
7	CHARLESTON, SC	PCT	3,985	611	6.5
7	DUBLIN, GA	PCT	7,553	658	11.5
8	BAY PINES, FL	PCT	9,607	1,196	8.0
8	MIAMI, FL	PCT	4,837	485	10.0
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,331	511	10.4
8	SAN JUAN, PR	PCT	3,193	569	5.6
8	TAMPA, FL	PCT	7,311	990	7.4
9	HUNTINGTON, WV	PCT	1,218	503	2.4
9	LEXINGTON, KY	PCT	5,698	324	17.6
9	LOUISVILLE, KY	PCT	1,716	463	3.7
9	MEMPHIS, TN	PCT	4,654	787	5.9
9	MOUNTAIN HOME, TN	PCT	5,739	1,141	5.0
10	BRECKSVILLE, OH	PCT	11,119	876	12.7
10	BRECKSVILLE, OH	WSDTT	871	154	5.7
10	CHILLICOTHE, OH	PCT	4,111	926	4.4
10	CINCINNATI, OH	PCT	6,608	783	8.4
10	COLUMBUS, OH	PCT	2,775	486	5.7
10	DAYTON, OH	PCT	3,770	513	7.3
11	ANN ARBOR (MI) HCS	PCT	3,370	364	9.3
11	BATTLE CREEK, MI	PCT	6,407	863	7.4
11	DANVILLE, IL	PCT	2,500	456	5.5
11	NORTHERN IN HCS: Fort Wayne	PCT	1,548	272	5.7
11	NORTHERN IN HCS: Marion	PCT	3,285	417	7.9

Table 8. INTENSITY DATA: SOPPs By INDIVIDUAL PROGRAM, FY 2004.

VISN	FACILITY	PROGRAM	FY 2004		
			# VISITS	# VETS SEEN	VISITS/VETERANS*
12	CHICAGO (IL) HCS: West Side	PCT	10,513	676	15.6
12	HINES, IL	PCT	2,425	407	6.0
12	MADISON, WI	WSDTT	1,382	243	5.7
15	EASTERN KS HCS: Topeka	PCT	8,353	492	17.0
15	KANSAS CITY, MO	PCT	5,593	756	7.4
15	POPLAR BLUFF, MO	PCT	2,432	514	4.7
15	ST. LOUIS, MO	PCT	9,045	1,052	8.6
15	WICHITA, KS	PCT	4,805	257	18.7
16	CENTRAL AR VETERANS HCS (Little Rock)	PCT	9,073	1,531	5.9
16	FAYETTEVILLE, AR	PCT	3,694	906	4.1
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	9,830	893	11.0
16	HOUSTON, TX	PCT	23,395	2,614	8.9
16	JACKSON, MS	PCT	6,261	1,029	6.1
16	MUSKOGEE, OK	PCT	8,387	1,194	7.0
16	NEW ORLEANS, LA	PCT	26,069	2,318	11.2
16	NEW ORLEANS, LA	WSDTT	806	120	6.7
16	OKLAHOMA CITY, OK	PCT	9,366	602	15.6
16	SHREVEPORT, LA*	PCT	1,994	444	4.5
17	CENTRAL TX VETERANS HCS: Austin	PCT	4,791	577	8.3
17	CENTRAL TX VETERANS HCS: Temple	PCT	2,764	395	7.0
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,264	383	11.1
17	NORTH TX HCS: Dallas	PCT	7,934	592	13.4
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,871	1,756	5.6
18	EL PASO (TX) VETERANS HCS	PCT	6,615	928	7.1
18	NEW MEXICO HCS (Albuquerque)	PCT	12,134	1,825	6.6
18	PHOENIX, AZ	PCT	7,310	758	9.6
18	SOUTHERN AZ HCS (Tucson)	PCT	5,962	969	6.2
19	CHEYENNE, WY	PCT	2,040	335	6.1
19	GRAND JUNCTION, CO	PCT	264	163	1.6
19	SALT LAKE CITY (UT) HCS	PCT	8,705	1,245	7.0
20	BOISE, ID	PCT	3,216	400	8.0
20	PORTLAND, OR	PCT	9,648	1,211	8.0
20	PUGET SOUND (WA) HCS: Seattle	PCT	36,774	3,929	9.4
20	SPOKANE, WA	PCT	3,653	544	6.7
21	HONOLULU, HI	PCT	7,543	556	13.6
21	NORTHERN CA HCS	PCT	1,600	551	2.9
21	PALO ALTO (CA) HCS: San Jose	PCT	8,197	696	11.8
21	SAN FRANCISCO, CA	PCT	13,609	1,489	9.1
21	SAN FRANCISCO, CA	SUPT	3,588	148	24.2
22	GREATER LOS ANGELES (CA) HCS: East L	PCT	6,176	615	10.0
22	GREATER LOS ANGELES (CA) HCS: West L	PCT	6,923	688	10.1
22	LOMA LINDA, CA	PCT	4,049	385	10.5
22	LOMA LINDA, CA	WSDTT	1,815	283	6.4
22	SAN DIEGO (CA) HCS CA	PCT	17,211	1,750	9.8
22	SOUTHERN NV HCS (Las Vegas)	PCT	8,250	858	9.6
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,518	394	11.5
23	CENTRAL IA HCS: Knoxville	PCT	2,465	211	11.7
23	IOWA CITY, IA	PCT	2,559	614	4.2
23	MINNEAPOLIS, MN	PCT	10,099	1,180	8.6
23	NE-WESTERN IA HCS: Lincoln	PCT	2,423	344	7.0
23	NE-WESTERN IA HCS: Omaha	PCT	4,749	468	10.1
ALL VA			695,417	80,201	8.7
AVERAGE			6,623	775	8.8
SD			5,157	547	3.7
CV			0.78	0.71	0.42

\* Outlined cells are 1 SD below the mean.



Table 9. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2004\*

VISN	Inpatient PTSD Treatment				Dom. and PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Total Occupied PTSD Beds	Total Vet Population	PTSD Beds Per 10,000 Veterans
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS							
1	299	25	8.4%	19.6	147	4	2.7%	64	29	1,500,892	0.19
2	50	3	6.0%	11.0	323	13	4.0%	18	16	697,421	0.23
3	190	10	5.3%	16.3	355	48	13.5%	37	58	1,595,593	0.36
4	206	5	2.4%	7.0	368	36	9.8%	39	41	1,819,870	0.23
5	105	2	1.9%	<b><u>126.0</u></b>	431	74	17.2%	72	76	857,564	0.89
6	244	37	15.2%	18.5	209	0	0.0%	NA	37	1,251,189	0.30
7	159	12	7.5%	4.1	180	43	23.9%	44	55	1,367,528	0.40
8	105	8	7.6%	4.9	157	43	27.4%	32	51	1,634,357	0.31
9	163	10	6.1%	16.8	283	5	1.8%	<b><u>139</u></b>	15	1,060,416	0.14
10	70	1	1.4%	1.0	331	9	2.7%	49	10	1,151,473	<b>0.09</b>
11	203	3	1.5%	17.7	101	22	21.8%	13	25	1,651,186	0.15
12	119	7	5.9%	6.6	505	48	9.5%	53	55	1,362,314	0.40
15	162	30	18.5%	35.6	258	4	1.6%	<b><u>142</u></b>	34	1,071,604	0.32
16	266	6	2.3%	4.3	262	38	14.5%	26	44	1,887,301	0.23
17	123	5	4.1%	9.2	744	59	7.9%	87	64	1,026,699	0.62
18	70	8	11.4%	14.0	136	2	1.5%	<b><u>98</u></b>	10	842,132	0.12
19	101	10	9.9%	9.8	38	4	10.5%	27	14	731,842	0.19
20	107	26	24.3%	13.1	485	20	4.1%	65	46	1,191,422	0.39
21	82	4	4.9%	6.3	62	25	40.3%	28	29	1,418,772	0.20
22	159	7	4.4%	5.7	208	31	14.9%	78	38	1,841,007	0.21
23	69	0	0.0%	NA	308	30	9.7%	32	30	1,223,080	0.25
ALL VA	3052	219	7.2%	17.2	5891	558	9.5%	51	777	27,183,662	0.29
AVERAGE	145	10	7.1%	17.4	281	27	11.4%	57	71	1,294,460	0.30
SD	69	10	6.1%	26.7	168	21	10.3%	37	159	361,272	0.18
CV	0.48	0.98	0.85	1.5	0.60	0.79	0.90	0.64	2.25	0.28	0.62

\* Bolded /underlined values are 1 SD or higher above the mean of all VISNs, outlined values are 1 SD or lower below the mean.

Table 9a. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 2003, FY 2004, and FY 2004-2003 change.

VISN	FY 2003								FY 2004								% Change: FY 2004- FY 2003							
	<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>				<u>Inpatient PTSD Treatment</u>				<u>Domiciliary and PRRP Treatment</u>			
	Psych	PTSD	%		Dom. &	PTSD	%		Psych	PTSD	%		Dom. &	PTSD	%		Psych	PTSD	%		Dom. &	PTSD	%	
	Beds	Pts.	PTSD	LOS	PRRP Beds	Pts.	PTSD	LOS	Beds	Pts.	PTSD	LOS	PRRP Beds	Pts.	PTSD	LOS	Beds	Pts.	PTSD	LOS	PRRP Beds	Pts.	PTSD	LOS
1	325	31	9.5%	17.4	167	16	9.6%	104.3	299	25	8.4%	19.6	147	4	2.7%	64.0	-8.0%	-19.4%	-12.3%	12.5%	-12.0%	-75.0%	-71.6%	-38.6%
2	62	2	3.2%	3.5	286	12	4.2%	20.1	50	3	6.0%	11.0	323	13	4.0%	18.0	-19.4%	50.0%	86.0%	NA	12.9%	8.3%	-4.1%	-10.4%
3	180	4	2.2%	5.5	320	50	15.6%	37.7	190	10	5.3%	16.3	355	48	13.5%	37.3	5.6%	150.0%	136.8%	196.4%	10.9%	-4.0%	-13.5%	-1.1%
4	195	1	0.5%	4.0	376	33	8.8%	40.9	206	5	2.4%	7.0	368	36	9.8%	38.6	5.6%	400.0%	373.3%	75.0%	-2.1%	9.1%	11.5%	-5.7%
5	116	3	2.6%	8.3	430	74	17.2%	84.6	105	2	1.9%	126.0	431	74	17.2%	71.7	-9.5%	-33.3%	-26.3%	1412.0%	0.2%	0.0%	-0.2%	-15.2%
6	253	38	15.0%	24.2	169	1	0.6%	28.0	244	37	15.2%	18.5	209	0	0.0%	NA	-3.6%	-2.6%	1.0%	-23.6%	23.7%	-100.0%	-100.0%	-100.0%
7	182	12	6.6%	28.6	145	39	26.9%	41.6	159	12	7.5%	4.1	180	43	23.9%	43.8	-12.6%	0.0%	14.5%	-85.7%	24.1%	10.3%	-11.2%	5.3%
8	112	9	8.0%	7.8	169	30	17.8%	26.4	105	8	7.6%	4.9	157	43	27.4%	31.7	-6.3%	-11.1%	-5.2%	-37.3%	-7.1%	43.3%	54.3%	20.0%
9	137	5	3.6%	7.0	317	5	1.6%	262.0	163	10	6.1%	16.8	283	5	1.8%	139.0	19.0%	100.0%	68.1%	140.0%	-10.7%	0.0%	12.0%	-46.9%
10	68	0	0.0%	NA	330	21	6.4%	34.2	70	1	1.4%	1.0	331	9	2.7%	49.0	2.9%	NA	NA	NA	0.3%	-57.1%	-57.3%	43.1%
11	205	8	3.9%	16.9	100	24	24.0%	12.2	203	3	1.5%	17.7	101	22	21.8%	12.6	-1.0%	-62.5%	-62.1%	4.7%	1.0%	-8.3%	-9.2%	3.5%
12	113	11	9.7%	39.2	532	49	9.2%	64.3	119	7	5.9%	6.6	505	48	9.5%	52.6	5.3%	-36.4%	-39.6%	-83.2%	-5.1%	-2.0%	3.2%	-18.2%
15	156	29	18.6%	34.2	234	6	2.6%	78.3	162	30	18.5%	35.6	258	4	1.6%	141.8	3.8%	3.4%	-0.4%	4.2%	10.3%	-33.3%	-39.5%	81.0%
16	283	11	3.9%	21.0	263	30	11.4%	30.2	266	6	2.3%	4.3	262	38	14.5%	25.5	-6.0%	-45.5%	-42.0%	-79.4%	-0.4%	26.7%	27.2%	-15.4%
17	133	15	11.3%	32.1	628	31	4.9%	100.1	123	5	4.1%	9.2	744	59	7.9%	86.9	-7.5%	-66.7%	-64.0%	-71.3%	18.5%	90.3%	60.6%	-13.2%
18	77	8	10.4%	7.1	134	2	1.5%	46.0	70	8	11.4%	14.0	136	2	1.5%	97.5	-9.1%	0.0%	10.0%	96.5%	1.5%	0.0%	-1.5%	112.0%
19	98	8	8.2%	18.1	37	6	16.2%	29.3	101	10	9.9%	9.8	38	4	10.5%	27.3	3.1%	25.0%	21.3%	-45.9%	2.7%	-33.3%	-35.1%	-7.1%
20	121	31	25.6%	14.1	626	22	3.5%	101.0	107	26	24.3%	13.1	485	20	4.1%	65.2	-11.6%	-16.1%	-5.2%	-7.4%	-22.5%	-9.1%	17.3%	-35.5%
21	86	5	5.8%	17.2	152	48	31.6%	32.7	82	4	4.9%	6.3	62	25	40.3%	28.3	-4.7%	-20.0%	-16.1%	-63.7%	-59.2%	-47.9%	27.7%	-13.4%
22	146	3	2.1%	124.3	199	18	9.0%	133.4	159	7	4.4%	5.7	208	31	14.9%	77.9	8.9%	133.3%	114.3%	-95.4%	4.5%	72.2%	64.8%	-41.6%
23	62	2	3.2%	17.0	352	29	8.2%	71.0	69	0	0.0%	NA	308	30	9.7%	31.9	11.3%	-100.0%	-100.0%	-100.0%	-12.5%	3.4%	18.2%	-55.1%
ALL VA	3110	236	7.6%	22.7	5966	546	9.2%	59.2	3,052	219	7.2%	17.2	5891	558	9.5%	51.1	-1.9%	-7.2%	-5.4%	-24.3%	-1.3%	2.2%	3.5%	-13.7%
AVG	148	12	7.3%	22.4	284	26	11.0%	65.6	145	10	7.1%	17.4	281	27	11.4%	57.0	-1.6%	22.4%	22.6%	65.7%	-1.0%	-5.1%	-2.2%	-7.3%
SD	73	11	6.4%	26.2	164	19	8.7%	55.9	69	10	6.1%	26.7	168	21	10.3%	36.7	9.2%	109.4%	101.6%	336.5%	17.9%	44.3%	41.7%	45.5%
CV	0.49	0.95	0.87	1.17	0.58	0.72	0.79	0.85	0.48	0.98	0.85	1.54	0.60	0.79	0.90	0.64	-5.78	4.88	4.50	5.12	-17.92	-8.74	-18.88	-6.26

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2004

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
1	518	BEDFORD	58	0	0.00%		49	0	0.00%	
1	523	BOSTON HCS	91	1	1.10%	4.0	83	4	4.82%	64.0
1	689	CONNECTICUT HCS	27	2	7.41%	8.5	3	0	0.00%	
1	631	NORTHAMPTON	86	20	23.26%	22.8	12	0	0.00%	
1	650	PROVIDENCE	16	0	0.00%					
1	402	TOGUS	11	1	9.09%	8.0				
1	405	WHITE RIVER JCT	10	1	10.00%	4.0				
2	500	ALBANY	7	0	0.00%					
2	514	BATH								
2	532	CANANDAIGUA	12	0	0.00%					
2	670	SYRACUSE	12	1	8.33%	10.0				
2	528	WESTERN NEW YORK HCS	19	2	10.53%	11.5	323	13	4.02%	18.0
3	526	BRONX	19	3	15.79%	23.7				
3	620	HUDSON VALLEY HCS	52	2	3.85%	5.5	96	22	22.92%	41.2
3	561	NEW JERSEY HCS	55	4	7.27%	20.0	151	20	13.25%	26.9
3	630	NEW YORK HARBOR HCS	29	1	3.45%	1.0	73	0	0.00%	
3	632	NORTHPORT	35	0	0.00%		35	6	17.14%	57.5
4	503	ALTOONA								
4	529	BUTLER					49	0	0.00%	
4	540	CLARKSBURG	5	0	0.00%		11	7		33.9
4	542	COATESVILLE	68	1	1.47%	7.0	211	29	13.74%	39.7
4	562	ERIE								
4	595	LEBANON	21	1	4.76%	3.0	42	0	0.00%	
4	642	PHILADELPHIA	21	2	9.52%	6.5				
4	646	PITTSBURGH HCS	65	1	1.54%	12.0	49	0	0.00%	
4	693	WILKES BARRE	26	0	0.00%		6	0	0.00%	
4	460	WILMINGTON								
5	613	MARTINSBURG	19	1	5.26%	7.0	288	54	18.75%	88.3
5	512	MARYLAND HCS	69	1	1.45%	245.0	143	20	13.99%	26.9
5	688	WASHINGTON DC	17	0	0.00%					
6	637	ASHEVILLE	13	2	15.38%	184.5	19	0	0.00%	
6	517	BECKLEY								
6	558	DURHAM	19	1	5.26%	8.0				
6	565	FAYETTEVILLE NC	18	1	5.56%	12.0				
6	590	HAMPTON	27	1	3.70%	3.0	150	0	0.00%	
6	652	RICHMOND	17	0	0.00%					
6	658	SALEM	88	12	13.64%	10.9	12	0	0.00%	
6	659	SALISBURY	62	20	32.26%	8.0	28	0	0.00%	

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2004

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
7	508	ATLANTA	20	4	20.00%	2.3	10	0	0.00%	51.2
7	509	AUGUSTA	40	3	7.50%	8.7	53	13	24.53%	
7	521	BIRMINGHAM					12	0	0.00%	
7	619	CENTRAL ALABAMA VETERANS HCS	17	1	5.88%	2.0	59	11	18.64%	
7	534	CHARLESTON	8	0	0.00%					
7	544	COLUMBIA SC	9	1	11.11%	3.0				
7	557	DUBLIN					46	19	41.30%	
7	679	TUSCALOOSA	65	3	4.62%	3.0				30.4
8	516	BAY PINES	19	3	15.79%	3.0	58	25	43.10%	24.3
8	546	MIAMI	16	2	12.50%	4.0	45	18	40.00%	42.0
8	573	NO. FL/SO. GA VETERANS HS	20	0	0.00%		25	0	0.00%	
8	672	SAN JUAN PR	19	0	0.00%					
8	673	TAMPA	31	3	9.68%	7.3	29	0	0.00%	
8	548	W PALM BEACH								
9	581	HUNTINGTON								139.0
9	596	LEXINGTON	16	0	0.00%					
9	603	LOUISVILLE	17	1	5.88%	1.0				
9	614	MEMPHIS	25	2	8.00%	9.5	9	0	0.00%	
9	626	MIDDLE TENN HCS	89	3	3.37%	38.0				
9	621	MOUNTAIN HOME	16	4	25.00%	8.5	274	5	1.82%	
10	538	CHILLICOTHE	11	1	9.09%	1.0	53	0	0.00%	17.0
10	539	CINCINNATI	11	0	0.00%		80	1	1.25%	
10	541	CLEVELAND	38	0	0.00%		108	1	0.93%	
10	552	DAYTON	10	0	0.00%		90	7	7.78%	
11	553	ALLEN PARK	14	0	0.00%					12.6
11	506	ANN ARBOR HCS	12	0	0.00%					
11	515	BATTLE CREEK	72	3	4.17%	17.7	74	22	29.73%	
11	550	ILLIANA HCS	38	0	0.00%		6	0	0.00%	
11	583	INDIANAPOLIS					21	0	0.00%	
11	610	NORTHERN INDIANA HCS	67	0	0.00%					
11	655	SAGINAW								
12	537	CHICAGO HCS	23	4	17.39%	6.8	36	6	16.67%	18.3
12	578	HINES	19	1	5.26%	6.0	22	2	9.09%	18.0
12	585	IRON MOUNTAIN								139.7
12	607	MADISON	13	2	15.38%	6.5	10	0	0.00%	
12	695	MILWAUKEE	16	0	0.00%		246	13	5.28%	
12	556	NORTH CHICAGO	45	0	0.00%		159	19	11.95%	12.2
12	676	TOMAH	3	0	0.00%		32	8	25.00%	41.3

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2004

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
15	543	COLUMBIA MO	9	0	0.00%	35.6	46 212	0 4	0.00% 1.89%	141.8
15	677	EASTERN KANSAS HCS	102	30	29.41%					
15	657	HEARTLAND-EAST HCS	32	0	0.00%					
15	589	HEARTLAND-WEST	19	0	0.00%					
15	609	MARION IL								
15	647	POPLAR BLUFF								
15	452	WICHITA								
16	502	ALEXANDRIA	45	1	2.22%	0.0	83 144 19 5 11	23 4 6 5 0	27.71% 2.78% 31.58% 100.00% 0.00%	20.3 83.3 2.5 31.2
16	598	CENTRAL ARKANSAS HCS	47	0	0.00%					
16	564	FAYETTEVILLE AR	13	0	0.00%					
16	520	GULF COAST HCS	46	0	0.00%					
16	580	HOUSTON	41	4	9.76%	4.3				
16	586	JACKSON	22	1	4.55%	9.0				
16	623	MUSKOGEE								
16	629	NEW ORLEANS	12	0	0.00%					
16	635	OKLAHOMA CITY	29	0	0.00%					
16	667	SHREVEPORT	11	0	0.00%					
17	674	CENTRAL TEXAS VETERANS HCS	57	1	1.75%	12.0	460	57	12.39%	88.4
17	549	NORTH TEXAS HCS	35	1	2.86%	11.0	264	2	0.76%	44.5
17	671	SOUTH TEXAS VETERANS HCS	31	3	9.68%	7.7	20	0	0.00%	
18	504	AMARILLO HCS	18	2	11.11%	13.5	15 113	0 2	0.00% 1.77%	97.5
18	501	NEW MEXICO HCS								
18	649	NORTHERN ARIZONA VA HCS								
18	644	PHOENIX								
18	678	SOUTHERN ARIZONA								
18	519	WEST TEXAS HCS	18	5	27.78%	16.4	8	0	0.00%	
19	442	CHEYENNE	32 6 16 47	5 0 2 3	15.63% 0.00% 12.50% 6.38%	14.0 9.5 3.0	13 25	0 4	0.00% 16.00%	27.3
19	554	DENVER								
19	575	GRAND JUNCTION								
19	436	MONTANA HCS								
19	660	SALT LAKE CITY HCS								
19	666	SHERIDAN								
20	463	ALASKA HCS & RO	8 20 45 25 7 2	5 1 10 9 1 0	62.50% 5.00% 22.22% 36.00% 14.29% 0.00%	25.2 16.0 7.0 14.2 0.0	31 4 74 8 24 344	1 0 14 0 0 5	0.00% 18.92% 0.00% 0.00% 1.45%	161.0 32.6 137.2
20	531	BOISE								
20	648	PORTLAND								
20	663	PUGET SOUND HCS								
20	653	ROSEBURG HCS								
20	668	SPOKANE								
20	687	WALLA WALLA								
20	692	WHITE CITY								

Table 10. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD: FY 2004

VISN	STATION VAMC	VAMC	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
			General Psych Beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*	Dom. and PRRP beds	Diagnosis: PTSD	Percent PTSD	Length of Stay*
21	570	CENTRAL CALIFORNIA HCS	6	0	0.00%					
21	459	HONOLULU	6	1	16.67%	14.0				
21	612	NORTHERN CALIFORNIA HCS								
21	640	PALO ALTO HCS	59	3	5.08%	3.7	62	25	40.32%	28.3
21	662	SAN FRANCISCO	4	0	0.00%					
21	654	SIERRA NEVADA HCS	7	0	0.00%					
22	691	GREATER LOS ANGELES HCS	86	3	3.49%	10.3	208	31	14.90%	77.9
22	605	LOMA LINDA	20	2	10.00%	3.5				
22	600	LONG BEACH HCS	16	0	0.00%					
22	664	SAN DIEGO HCS	26	1	3.85%	0.0				
22	593	SOUTHERN NEVADA HCS	11	1	9.09%	2.0				
23	568	BLACK HILLS HCS	6	0	0.00%		128	8	6.25%	40.6
23	555	CENTRAL IOWA HCS	2	0	0.00%					
23	437	FARGO	7	0	0.00%					
23	584	IOWA CITY	6	0	0.00%					
23	618	MINNEAPOLIS	18	0	0.00%					
23	636	NEBRASKA- WESTERN IOWA HCS	15	0	0.00%		67	8	11.94%	36.3
23	438	SIOUX FALLS	1	0	0.00%					
23	656	ST CLOUD	14	0	0.00%		113	14	12.39%	24.4
ALL VA			3052	219	7.18%	17.2	5891	558	9.47%	51.1
AVERAGE			28	2	6%	15.5	83	8	9.95%	52.6
SD			23	4	10%	37.3	95	12	16.22%	41.1
CV			0.83	2.11	1.48	2.41	1.15	1.50	1.63	0.78

\* Outlined values are 1 SD above the mean of all VAMCs and reflect long length of stay.

Table 11. Comparison of all inpatient general psychiatry treatment and treatment for PTSD, by VISN, FY 2004.

VISN	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Tx. of PTSD				PTSD/Gen. Psych Ratio of Bed Days per ...*†	
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	Episode	Vet/Year
1	4,616	18.1	3,074	27.2	13.7%	16.6%	634	16.1	511	<b><u>20.0</u></b>	0.9	0.7
2	2,009	12.5	1,391	18.0	5.5%	6.8%	111	7.9	94	9.4	0.6	0.5
3	3,303	17.8	2,335	25.2	5.7%	6.6%	187	13.8	154	16.8	0.8	0.7
4	3,761	17.6	2,771	23.9	7.3%	8.7%	276	<b><u>18.2</u></b>	240	<b><u>20.9</u></b>	1.0	0.9
5	4,291	10.2	2,503	17.5	3.6%	5.3%	153	8.0	133	9.2	0.8	0.5
6	6,613	12.4	4,340	18.8	13.4%	15.6%	884	15.2	678	19.8	1.2	<b><u>1.1</u></b>
7	4,996	12.3	3,494	17.6	10.7%	12.4%	535	8.8	435	10.8	0.7	0.6
8	6,262	7.1	4,228	10.5	4.7%	6.0%	293	5.3	254	6.1	0.7	0.6
9	5,114	9.8	3,721	13.5	6.3%	6.8%	321	8.6	252	10.9	0.9	0.8
10	3,807	9.2	2,639	13.2	3.7%	4.6%	141	6.0	122	7.0	0.7	0.5
11	3,794	16.6	2,703	23.3	3.6%	4.3%	138	12.4	116	14.7	0.7	0.6
12	4,772	9.3	3,216	13.8	4.8%	5.9%	231	9.1	189	11.2	1.0	0.8
15	4,953	12.9	3,408	18.8	7.7%	9.4%	380	<b><u>28.6</u></b>	320	<b><u>34.0</u></b>	<b><u>2.2</u></b>	<b><u>1.8</u></b>
16	7,772	13.1	5,623	18.2	4.9%	6.0%	380	11.7	336	13.2	0.9	0.7
17	4,300	12.3	2,985	17.7	6.7%	7.8%	290	12.5	233	15.5	1.0	0.9
18	3,372	7.6	2,269	11.2	7.6%	10.2%	256	9.4	232	10.4	1.2	0.9
19	2,306	16.2	1,619	23.1	12.1%	15.4%	280	8.6	250	9.6	0.5	0.4
20	3,721	10.4	2,732	14.2	17.1%	20.8%	636	14.8	569	16.6	<b><u>1.4</u></b>	<b><u>1.2</u></b>
21	3,298	11.6	2,165	17.7	5.3%	6.7%	176	9.3	145	11.3	0.8	0.6
22	3,859	15.2	2,809	20.9	4.4%	5.3%	168	10.8	149	12.2	0.7	0.6
23	3,363	7.3	2,328	10.6	3.8%	4.5%	127	6.2	105	7.4	0.8	0.7
ALL VA	90,282	12.2	60,702	18.1	7.3%	9.0%	6,597	12.8	5,464	15.5	1.1	0.9
AVERAGE	4,299	12.4	2,969	17.9	7.3%	8.8%	314	11.5	263	13.7	0.9	0.8
SD	1,368	3.5	959	4.8	3.9%	4.7%	203	5.3	162	6.3	0.4	0.3
CV	0.32	0.3	0.32	0.27	0.53	0.53	0.65	0.46	0.62	0.46	0.39	0.39

\*Bolded (underlined) values are 1 SD higher or above the mean of all VISNs; outlined values are 1 SD lower or below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 11-2. Comparison of all Domiciliary and PRRP treatment and treatment for PTSD, by VISN, FY 2004.

VISN	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP		Veterans Treated for PTSD/ Total Veteran Population		
	Episodes of Care	Bed Days/ Episode	Unique Veterans	Bed Days/ Vet/Year	All Episodes	Unique Veterans*	Episodes of Care	Bed Days/ Episode*	Unique Veterans	Bed Days/ Vet/Year*	Ratio of Bed Days per ...*†		Total Vet Population	Total PTSD Episodes of Care††	Total PTSD Episodes/Total Vet Population
											Episode	Vet/Year			
1	867	69.0	704	85.0	2.9%	3.3%	25	93.4	23	101.5	<b>1.5</b>	1.1	1,327,933	659	0.50
2	1,546	69.4	1,280	83.8	21.0%	19.4%	324	12.2	248	15.9	0.2	0.2	617,040	435	0.70
3	1,998	61.0	1,644	74.1	16.5%	18.7%	329	60.0	308	64.1	1.1	0.9	1,230,989	516	0.42
4	2,520	53.5	2,346	57.5	7.3%	7.6%	185	64.5	178	67.0	1.3	1.1	1,635,354	461	0.28
5	1,664	79.5	1,514	87.4	18.8%	19.5%	313	79.2	295	84.0	1.1	1.1	827,066	466	0.56
6	1,440	45.9	1,352	48.9	0.3%	0.3%	4	40.5	4	40.5	0.9	0.2	1,383,878	888	0.64
7	848	56.6	802	59.8	23.0%	23.6%	195	56.2	189	58.0	1.0	0.7	1,501,145	730	0.49
8	969	64.2	895	69.5	27.2%	28.9%	264	49.1	259	50.0	0.8	0.8	1,935,726	557	0.29
9	846	86.3	813	89.8	0.7%	0.7%	6	<b>172.5</b>	6	<b>172.5</b>	<b>2.0</b>	1.0	1,099,248	327	0.30
10	3,083	35.9	2,505	44.1	5.3%	6.1%	164	52.2	154	55.6	<b>1.6</b>	<b>1.2</b>	1,066,077	305	0.29
11	797	43.4	707	48.9	43.9%	39.6%	350	25.3	280	31.7	0.7	0.6	1,533,351	488	0.32
12	2,238	61.9	1,998	69.3	15.8%	16.6%	353	46.1	331	49.2	0.8	0.7	1,221,864	584	0.48
15	526	142.0	502	148.8	1.7%	1.4%	9	<b>127.9</b>	7	<b>164.4</b>	1.2	<b>1.5</b>	1,030,765	389	0.38
16	1,448	67.3	1,374	70.9	19.0%	19.8%	275	42.4	272	42.9	0.6	0.6	1,946,911	655	0.34
17	2,316	68.4	1,848	85.7	6.9%	8.0%	159	89.7	148	96.4	<b>1.4</b>	1.1	1,092,479	449	0.41
18	745	69.6	695	74.6	2.1%	2.3%	16	81.8	16	81.8	1.2	0.4	948,529	272	0.29
19	394	35.0	370	37.2	17.3%	17.0%	68	40.0	63	43.2	1.2	1.0	799,369	348	0.44
20	1,854	100.4	1,720	108.3	8.1%	8.5%	151	53.2	146	55.0	0.5	0.7	1,248,708	787	0.63
21	656	86.7	615	92.5	43.1%	44.6%	283	58.2	274	60.1	0.7	0.7	1,280,265	459	0.36
22	701	111.9	678	115.7	12.7%	12.8%	89	<b>132.9</b>	87	<b>136.0</b>	1.2	1.1	1,638,730	257	0.16
23	2,228	52.4	1,960	59.5	10.3%	11.0%	230	61.5	215	65.8	1.3	1.1	1,184,277	357	0.30
ALL VA	29,684	64.8	25,806	74.5	12.8%	13.3%	3,792	53.6	3,440	59.1	0.9	0.8	26,549,704	10,389	0.39
AVERAGE	1,414	69.5	1,253	76.7	14.5%	14.7%	181	68.5	167	73.1	1.1	0.8	1,264,272	495	0.41
SD	764	25.6	638.5	26.2	12.5%	12.2%	125.0	38.0	113.2	41.2	0.4	0.3	348,416	171.9	0.14
CV	0.54	0.37	0.51	0.34	0.86	0.83	0.69	0.56	0.68	0.56	0.37	0.40	0.28	0.35	0.35

\*Bolded/underlined values are 1 SD higher or above the mean of all VISNs. Outlined values are 1 SD lower or below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all domiciliary and PRRP treatment.

†† Includes general psychiatry inpatient episodes (from table 11) and domiciliary and PRRP episodes for veterans with PTSD.



Table 11a. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 2003, FY 2004 and FY 2004-2003 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 2003				FY 2004				Change				FY 2003				FY 2004				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode *	Bed Days/ Vet/Year *	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	724	555	15.3	19.9	634	511	16.1	20.0	-12.4%	-7.9%	5.5%	0.3%	47	45	82.7	86.4	25	23	93.4	101.5	-46.8%	-48.9%	12.9%	17.5%
2	116	97	9.5	11.4	111	94	7.9	9.4	-4.3%	-3.1%	-16.7%	-17.7%	298	225	13.4	17.8	324	248	12.2	15.9	8.7%	10.2%	-9.2%	-10.5%
3	198	176	11.8	13.3	187	154	13.8	16.8	-5.6%	-12.5%	17.0%	26.3%	330	317	58.5	60.9	329	308	60.0	64.1	-0.3%	-2.8%	2.6%	5.3%
4	207	183	10.7	12.1	276	240	18.2	20.9	33.3%	31.1%	70.8%	73.7%	189	184	60.4	62.0	185	178	64.5	67.0	-2.1%	-3.3%	6.7%	8.0%
5	158	136	7.3	8.4	153	133	8.0	9.2	-3.2%	-2.2%	10.0%	8.9%	266	254	90.3	94.6	313	295	79.2	84.0	17.7%	16.1%	-12.3%	-11.1%
6	997	743	14.2	19.0	884	678	15.2	19.8	-11.3%	-8.7%	7.3%	4.2%	5	5	10.0	10.0	4	4	40.5	40.5	-20.0%	-20.0%	305.0%	305.0%
7	599	475	8.1	10.3	535	435	8.8	10.8	-10.7%	-8.4%	8.2%	5.5%	238	224	42.3	45.0	195	189	56.2	58.0	-18.1%	-15.6%	32.9%	29.0%
8	290	233	5.8	7.2	293	254	5.3	6.1	1.0%	9.0%	-8.4%	-15.1%	201	194	62.4	64.7	264	259	49.1	50.0	31.3%	33.5%	-21.4%	-22.7%
9	286	228	8.7	10.9	321	252	8.6	10.9	12.2%	10.5%	-1.4%	0.1%	13	13	93.4	93.4	6	6	172.5	172.5	-53.8%	-53.8%	84.7%	84.7%
10	119	106	8.0	9.0	141	122	6.0	7.0	18.5%	15.1%	-24.9%	-22.7%	152	147	52.5	54.3	164	154	52.2	55.6	7.9%	4.8%	-0.6%	2.4%
11	145	122	11.8	14.0	138	116	12.4	14.7	-4.8%	-4.9%	5.0%	5.1%	380	308	22.7	28.0	350	280	25.3	31.7	-7.9%	-9.1%	11.6%	13.1%
12	235	183	9.7	12.5	231	189	9.1	11.2	-1.7%	3.3%	-5.9%	-10.4%	375	331	42.2	47.8	353	331	46.1	49.2	-5.9%	0.0%	9.3%	2.9%
15	360	298	30.2	36.5	380	320	28.6	34.0	5.6%	7.4%	-5.4%	-7.0%	9	7	174.6	224.4	9	7	127.9	164.4	0.0%	0.0%	-26.7%	-26.7%
16	347	293	11.9	14.1	380	336	11.7	13.2	9.5%	14.7%	-2.2%	-6.6%	308	302	37.6	38.4	275	272	42.4	42.9	-10.7%	-9.9%	12.7%	11.7%
17	302	229	13.2	17.4	290	233	12.5	15.5	-4.0%	1.7%	-5.4%	-10.7%	147	139	86.1	91.1	159	148	89.7	96.4	8.2%	6.5%	4.1%	5.8%
18	261	229	10.6	12.1	256	232	9.4	10.4	-1.9%	1.3%	-11.7%	-14.5%	4	4	31.3	31.3	16	16	81.8	81.8	300.0%	300.0%	161.6%	161.6%
19	315	287	8.7	9.5	280	250	8.6	9.6	-11.1%	-12.9%	-1.0%	1.0%	56	54	37.4	38.8	68	63	40.0	43.2	21.4%	16.7%	6.9%	11.2%
20	762	640	13.5	16.0	636	569	14.8	16.6	-16.5%	-11.1%	10.0%	3.3%	160	155	64.0	66.0	151	146	53.2	55.0	-5.6%	-5.8%	-16.8%	-16.7%
21	129	113	8.4	9.6	176	145	9.3	11.3	36.4%	28.3%	10.6%	17.6%	262	255	56.5	58.1	283	274	58.2	60.1	8.0%	7.5%	3.0%	3.6%
22	144	127	9.0	10.2	168	149	10.8	12.2	16.7%	17.3%	20.7%	20.0%	93	92	143.1	144.6	89	87	132.9	136.0	-4.3%	-5.4%	-7.1%	-6.0%
23	129	110	5.0	5.8	127	105	6.2	7.4	-1.6%	-4.5%	23.7%	27.6%	233	208	60.5	67.8	230	215	61.5	65.8	-1.3%	3.4%	1.6%	-2.9%
All VA	6,823	5,492	12.3	15.2	6,597	5,464	12.8	15.5	-3.3%	-0.5%	4.3%	1.3%	3,766	3,399	53.0	58.7	3,792	3,440	53.6	59.1	0.7%	1.2%	1.2%	0.6%
AVG.	325	265	11.0	13.3	314	263	11.5	13.7	2.1%	3.0%	5.0%	4.2%	179	165	63.0	67.9	181	167	68.5	73.1	10.8%	10.7%	26.7%	26.9%
S.D.	243	185	5.2	6.5	203	162	5.3	6.3	14.4%	12.8%	19.3%	21.2%	125	112	39.8	47.1	125	113	38.0	41.2	69.2%	69.2%	75.8%	75.7%
C.V.	0.75	0.70	0.47	0.49	0.65	0.62	0.46	0.46	6.84	4.25	3.83	5.00	0.70	0.68	0.63	0.69	0.69	0.68	0.56	0.56	6.41	6.49	2.83	2.81

Table 11b. Percent treated for PTSD in inpatient general psychiatry beds and domiciliary and PRRP beds by VISN: FY 2003, FY 2004 and FY 2004-2003 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 2003		FY 2004		% Change: FY 2003-2002		FY 2003		FY 2004		% Change: FY 2004-2003	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans*	All Episodes	Unique Veterans*	All Episodes	Unique Veterans
1	15.8%	17.9%	13.7%	16.6%	-12.8%	-6.9%	5.8%	6.2%	2.9%	3.3%	-50.7%	-47.2%
2	5.9%	7.2%	5.5%	6.8%	-6.7%	-5.9%	18.7%	18.1%	21.0%	19.4%	11.9%	6.8%
3	5.6%	7.1%	5.7%	6.6%	1.4%	-7.6%	16.1%	18.7%	16.5%	18.7%	2.0%	0.0%
4	5.9%	7.3%	7.3%	8.7%	24.4%	18.2%	8.5%	9.1%	7.3%	7.6%	-13.9%	-17.0%
5	4.0%	5.7%	3.6%	5.3%	-11.1%	-6.7%	11.8%	12.9%	18.8%	19.5%	59.9%	50.9%
6	15.6%	17.3%	13.4%	15.6%	-14.2%	-9.8%	0.5%	0.5%	0.3%	0.3%	-42.4%	-42.8%
7	11.9%	13.6%	10.7%	12.4%	-9.9%	-8.6%	32.2%	30.0%	23.0%	23.6%	-28.6%	-21.3%
8	4.9%	5.7%	4.7%	6.0%	-3.7%	5.8%	18.8%	19.6%	27.2%	28.9%	45.1%	47.8%
9	5.6%	6.3%	6.3%	6.8%	11.2%	6.9%	0.8%	0.9%	0.7%	0.7%	-14.2%	-13.4%
10	3.4%	4.3%	3.7%	4.6%	7.9%	6.5%	5.8%	6.7%	5.3%	6.1%	-8.9%	-8.4%
11	3.9%	4.7%	3.6%	4.3%	-7.5%	-8.0%	37.5%	34.0%	43.9%	39.6%	17.1%	16.5%
12	5.8%	6.9%	4.8%	5.9%	-16.0%	-14.4%	13.9%	14.2%	15.8%	16.6%	13.4%	16.5%
15	7.7%	9.1%	7.7%	9.4%	-0.3%	3.6%	2.2%	2.3%	1.7%	1.4%	-21.0%	-39.8%
16	4.6%	5.3%	4.9%	6.0%	5.7%	12.1%	25.9%	27.2%	19.0%	19.8%	-26.6%	-27.2%
17	6.9%	7.4%	6.7%	7.8%	-1.7%	5.2%	6.3%	7.6%	6.9%	8.0%	9.2%	4.8%
18	9.0%	11.7%	7.6%	10.2%	-15.8%	-12.9%	0.3%	0.3%	2.1%	2.3%	579.7%	580.3%
19	13.5%	16.7%	12.1%	15.4%	-9.8%	-7.7%	20.9%	21.6%	17.3%	17.0%	-17.5%	-21.3%
20	20.5%	23.7%	17.1%	20.8%	-16.5%	-12.1%	10.5%	10.8%	8.1%	8.5%	-22.1%	-21.6%
21	4.3%	5.6%	5.3%	6.7%	25.6%	18.7%	36.8%	38.0%	43.1%	44.6%	17.2%	17.2%
22	3.9%	4.7%	4.4%	5.3%	12.6%	13.4%	10.4%	10.6%	12.7%	12.8%	21.6%	20.8%
23	3.7%	4.7%	3.8%	4.5%	1.0%	-4.0%	7.7%	8.0%	10.3%	11.0%	34.3%	37.2%
ALL VA	7.8%	9.4%	7.3%	9.0%	-6.8%	-3.8%	12.5%	13.0%	12.8%	13.3%	2.5%	2.8%
AVERAGE	7.7%	9.2%	7.3%	8.8%	-1.7%	-0.7%	13.9%	14.2%	14.5%	14.7%	26.9%	25.7%
SD	4.8%	5.5%	3.9%	4.7%	12.6%	10.4%	11.4%	11.1%	12.5%	12.2%	129.8%	130.2%
CV	0.63	0.60	0.53	0.53	-7.25	-15.59	0.82	0.78	0.86	0.83	4.82	5.07

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2004. \*

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>of Bed Days per ...**</i>	
												<i>Episode</i>	<i>Vet/Year</i>
1	BEDFORD	1,033	15.3	747	21.2	1.3%	1.7%	13	12.8	13	12.8	0.8	0.6
1	BOSTON HCS	1,237	19.3	825	29.0	5.3%	6.8%	66	9.4	56	11.1	0.5	0.4
1	CONNECTICUT HCS	543	18.0	396	24.7	7.0%	7.8%	38	13.5	31	16.5	0.8	0.7
1	NORTHAMPTON	832	30.4	653	38.8	49.2%	51.5%	409	<u>20.2</u>	336	<u>24.6</u>	0.7	0.6
1	PROVIDENCE	570	9.4	400	13.4	7.7%	9.3%	44	7.2	37	8.6	0.8	0.6
1	TOGUS	49	6.8	48	6.9	12.2%	12.5%	6	1.8	6	1.8	0.3	0.3
1	WHITE RIVER JCT	352	9.0	244	13.0	16.5%	17.2%	58	5.7	42	7.8	0.6	0.6
2	ALBANY	394	7.6	305	9.8	6.3%	6.2%	25	5.7	19	7.5	0.8	0.8
2	CANANDAIGUA	398	27.6	277	39.6	5.3%	6.5%	21	9.4	18	11.0	0.3	0.3
2	SYRACUSE	376	9.7	301	12.1	8.8%	10.3%	33	7.8	31	8.4	0.8	0.7
2	WESTERN NEW YORK HCS	841	8.8	601	12.3	3.8%	4.8%	32	8.8	29	9.7	1.0	0.8
3	BRONX	409	14.6	328	18.2	4.6%	5.5%	19	<u>16.8</u>	18	17.7	1.1	<u>1.0</u>
3	HUDSON VALLEY HCS	456	30.9	326	43.3	12.5%	13.2%	57	<u>17.9</u>	43	<u>23.8</u>	0.6	0.5
3	NEW JERSEY HCS	869	16.9	609	24.1	6.4%	7.7%	56	11.0	47	13.1	0.6	0.5
3	NEW YORK HARBOR HCS	1,241	11.2	932	14.9	4.0%	4.8%	50	10.2	45	11.3	0.9	0.8
3	NORTHPORT	328	31.0	263	38.7	1.5%	1.9%	5	<u>23.2</u>	5	<u>23.2</u>	0.7	0.6
4	CLARKSBURG	369	17.4	316	20.3	22.8%	25.0%	84	<u>35.1</u>	79	<u>37.3</u>	<u>2.0</u>	<u>1.8</u>
4	COATESVILLE	582	26.5	476	32.4	9.1%	9.7%	53	12.9	46	14.8	0.5	0.5
4	LEBANON	578	11.7	418	16.1	4.7%	5.3%	27	9.5	22	11.6	0.8	0.7
4	PHILADELPHIA	759	14.7	614	18.2	8.0%	8.0%	61	13.3	49	16.5	0.9	0.9
4	PITTSBURGH HCS	1,137	20.0	835	27.2	3.4%	4.6%	39	5.6	38	5.8	0.3	0.2
4	WILKES BARRE	336	11.1	248	15.1	3.6%	4.4%	12	9.2	11	10.0	0.8	0.7
5	MARTINSBURG	1,104	5.8	683	9.4	3.9%	5.1%	43	6.1	35	7.5	1.1	0.8
5	MARYLAND HCS	2,057	14.5	1,349	22.1	4.0%	5.6%	82	9.6	75	10.5	0.7	0.5
5	WASHINGTON DC	1,130	6.8	722	10.7	2.5%	3.6%	28	6.1	26	6.5	0.9	0.6
6	ASHEVILLE	334	9.9	259	12.8	23.4%	25.5%	78	10.4	66	12.3	1.1	1.0
6	DURHAM	928	7.9	693	10.6	10.1%	11.5%	94	7.0	80	8.3	0.9	0.8
6	FAYETTEVILLE NC	690	8.9	489	12.6	7.5%	9.2%	52	6.1	45	7.1	0.7	0.6
6	HAMPTON	1,894	7.8	1,051	14.0	11.4%	12.7%	216	7.9	133	12.8	1.0	0.9
6	RICHMOND	669	6.9	504	9.2	6.1%	7.3%	41	6.9	37	7.6	1.0	0.8
6	SALEM	1,011	24.1	724	33.7	23.9%	23.2%	242	<u>17.2</u>	168	<u>24.8</u>	0.7	0.7
6	SALISBURY	1,087	19.6	878	24.2	14.8%	18.2%	161	<u>34.2</u>	160	<u>34.4</u>	<u>1.7</u>	<u>1.4</u>

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2004. \*

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>of Bed Days per ...**</i>	
												<i>Episode</i>	<i>Vet/Year</i>
7	ATLANTA	848	9.1	675	11.4	9.9%	11.0%	84	8.2	74	9.4	0.9	0.8
7	AUGUSTA	1,527	11.2	1,005	17.0	13.4%	15.2%	205	8.7	153	11.7	0.8	0.7
7	CENTRAL ALABAMA VETERANS HCS	1,008	8.8	689	12.8	11.7%	13.8%	118	7.9	95	9.8	0.9	0.8
7	CHARLESTON	572	8.3	451	10.5	5.8%	6.9%	33	7.2	31	7.7	0.9	0.7
7	COLUMBIA SC	487	9.7	398	11.9	10.7%	13.1%	52	8.9	52	8.9	0.9	0.7
7	TUSCALOOSA	554	33.4	450	41.2	7.8%	8.7%	43	14.0	39	15.4	0.4	0.4
8	BAY PINES	948	7.5	719	9.9	5.6%	7.2%	53	4.9	52	5.0	0.7	0.5
8	MIAMI	881	6.5	640	9.0	3.3%	4.4%	29	4.9	28	5.1	0.8	0.6
8	NO. FL/SO. GA VETERANS HS	1,160	6.5	888	8.5	3.3%	4.2%	38	3.3	37	3.4	0.5	0.4
8	SAN JUAN PR	978	9.4	675	13.7	0.8%	1.0%	8	10.1	7	11.6	1.1	0.8
8	TAMPA	1,136	7.5	807	10.5	5.1%	6.6%	58	6.5	53	7.1	0.9	0.7
8	W PALM BEACH	1,159	5.4	643	9.8	9.2%	12.4%	107	5.3	80	7.1	1.0	0.7
9	LEXINGTON	577	6.9	453	8.8	2.4%	2.9%	14	9.4	13	10.2	<b>1.4</b>	<b>1.2</b>
9	LOUISVILLE	866	7.0	628	9.7	2.5%	3.3%	22	6.4	21	6.7	0.9	0.7
9	MEMPHIS	1,020	8.7	781	11.4	7.9%	8.5%	81	10.0	66	12.3	1.1	<b>1.1</b>
9	MIDDLE TENN HCS	1,837	13.7	1,317	19.2	4.9%	5.3%	90	9.2	70	11.8	0.7	0.6
9	MOUNTAIN HOME	814	7.5	598	10.2	14.0%	13.9%	114	7.3	83	10.1	1.0	1.0
10	CHILLICOTHE	1,081	6.2	793	8.4	4.4%	5.4%	48	4.1	43	4.5	0.7	0.5
10	CINCINNATI	605	9.8	442	13.4	7.8%	8.6%	47	7.6	38	9.4	0.8	0.7
10	CLEVELAND	1,293	12.9	935	17.8	1.5%	1.9%	20	7.8	18	8.7	0.6	0.5
10	DAYTON	828	6.8	584	9.7	3.1%	4.1%	26	5.4	24	5.8	0.8	0.6
11	ALLEN PARK	710	8.1	535	10.7	1.0%	1.1%	7	6.3	6	7.3	0.8	0.7
11	ANN ARBOR HCS	479	11.2	377	14.2	3.8%	4.2%	18	8.1	16	9.1	0.7	0.6
11	BATTLE CREEK	1,293	19.5	924	27.3	5.1%	6.1%	66	15.2	56	17.9	0.8	0.7
11	ILLIANA HCS	456	18.4	344	24.4	3.1%	3.2%	14	7.0	11	8.9	0.4	0.4
11	INDIANAPOLIS	437	7.3	361	8.9	2.5%	3.0%	11	7.0	11	7.0	1.0	0.8
11	NORTHERN INDIANA HCS	419	35.7	296	50.6	5.3%	6.1%	22	15.5	18	<b>18.9</b>	0.4	0.4
12	CHICAGO HCS	1,270	10.5	867	15.4	7.2%	9.3%	91	11.6	81	13.0	1.1	0.8
12	HINES	1,004	8.6	757	11.4	3.4%	3.3%	34	8.4	25	11.5	1.0	<b>1.0</b>
12	MADISON	453	9.7	330	13.3	5.5%	5.5%	25	7.1	18	9.8	0.7	0.7
12	MILWAUKEE	987	5.0	714	6.9	2.7%	3.4%	27	4.1	24	4.6	0.8	0.7
12	NORTH CHICAGO	811	14.0	645	17.6	4.9%	5.3%	40	10.7	34	12.6	0.8	0.7
12	TOMAH	247	6.9	195	8.7	5.7%	7.2%	14	3.8	14	3.8	0.5	0.4
15	COLUMBIA MO	431	8.0	331	10.4	7.9%	8.8%	34	7.0	29	8.2	0.9	0.8
15	EASTERN KANSAS HCS	1,500	23.4	1,038	33.8	16.1%	19.9%	241	<b>40.9</b>	207	<b>47.6</b>	<b>1.7</b>	<b>1.4</b>
15	HEARTLAND-EAST HCS	2,078	8.2	1,453	11.7	3.8%	4.5%	79	7.9	65	9.6	1.0	0.8
15	HEARTLAND-WEST	944	9.0	699	12.2	2.8%	3.0%	26	6.1	21	7.5	0.7	0.6

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2004. \*

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	All	Unique	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	of Bed Days per ...**	
						Episodes	Veterans					Episode	Vet/Year
16	ALEXANDRIA	673	23.7	475	33.6	2.1%	2.9%	14	<b><u>22.9</u></b>	14	<b><u>22.9</u></b>	1.0	0.7
16	CENTRAL ARKANSAS HCS	1,121	17.7	781	25.4	7.2%	8.8%	81	<b><u>17.6</u></b>	69	<b><u>20.7</u></b>	1.0	0.8
16	FAYETTEVILLE AR	637	6.2	480	8.2	4.1%	5.2%	26	4.4	25	4.6	0.7	0.6
16	GULF COAST HCS	1,209	17.9	935	23.1	6.5%	7.4%	78	14.3	69	16.2	0.8	0.7
16	HOUSTON	1,176	11.4	902	14.9	6.4%	7.3%	75	6.8	66	7.8	0.6	0.5
16	JACKSON	674	9.5	502	12.8	1.8%	2.4%	12	10.3	12	10.3	1.1	0.8
16	NEW ORLEANS	748	8.1	561	10.9	7.4%	8.7%	55	8.1	49	9.1	1.0	0.8
16	OKLAHOMA CITY	847	12.0	626	16.2	3.3%	4.0%	28	11.6	25	13.0	1.0	0.8
16	SHREVEPORT	687	6.9	514	9.2	1.6%	2.1%	11	4.1	11	4.1	0.6	0.4
17	CENTRAL TEXAS VETERANS HCS	931	27.5	661	38.8	11.0%	12.6%	102	<b><u>21.2</u></b>	83	<b><u>26.0</u></b>	0.8	0.7
17	NORTH TEXAS HCS	1,319	8.7	1,079	10.7	3.0%	3.5%	40	6.9	38	7.2	0.8	0.7
17	SOUTH TEXAS VETERANS HCS	2,050	7.7	1,311	12.0	7.2%	8.6%	148	8.0	113	10.5	1.0	0.9
18	NEW MEXICO HCS	758	10.9	539	15.3	7.0%	9.3%	53	5.9	50	6.3	0.5	0.4
18	PHOENIX	1,832	5.7	1,177	8.8	4.4%	6.2%	80	5.2	73	5.6	0.9	0.6
18	SOUTHERN ARIZONA	782	8.7	588	11.6	15.7%	18.9%	123	13.6	111	15.1	<b><u>1.6</u></b>	<b><u>1.3</u></b>
19	DENVER	719	17.5	565	22.3	24.2%	29.0%	174	5.6	164	6.0	0.3	0.3
19	GRAND JUNCTION	275	9.2	184	13.7	6.5%	8.2%	18	9.0	15	10.8	1.0	0.8
19	SALT LAKE CITY HCS	775	8.9	523	13.2	4.1%	5.0%	32	7.9	26	9.8	0.9	0.7
19	SHERIDAN	537	28.7	431	35.7	10.4%	11.6%	56	<b><u>17.9</u></b>	50	<b><u>20.1</u></b>	0.6	0.6
20	BOISE	398	7.3	280	10.4	9.5%	11.1%	38	<b><u>17.6</u></b>	31	<b><u>21.5</u></b>	<b><u>2.4</u></b>	<b><u>2.1</u></b>
20	PORTLAND	722	9.3	523	12.8	4.3%	5.5%	31	9.0	29	9.6	1.0	0.7
20	PUGET SOUND HCS	1,400	12.1	1,122	15.1	26.9%	30.8%	376	12.2	346	13.2	1.0	0.9
20	ROSEBURG HCS	897	10.8	622	15.5	18.6%	23.2%	167	<b><u>22.5</u></b>	144	<b><u>26.0</u></b>	<b><u>2.1</u></b>	<b><u>1.7</u></b>
20	SPOKANE	212	8.4	177	10.1	7.1%	7.9%	15	6.7	14	7.2	0.8	0.7
20	WALLA WALLA	92	7.0	75	8.6	9.8%	10.7%	9	5.0	8	5.6	0.7	0.7
21	CENTRAL CALIFORNIA HCS	416	6.3	304	8.6	4.3%	5.9%	18	7.2	18	7.2	1.1	0.8
21	HONOLULU	361	10.1	204	17.9	6.9%	9.8%	25	9.7	20	12.1	1.0	0.7
21	PALO ALTO HCS	1,630	13.7	1,048	21.3	5.6%	7.2%	92	10.8	75	13.3	0.8	0.6
21	SAN FRANCISCO	312	20.5	241	26.5	7.4%	7.9%	23	7.5	19	9.1	0.4	0.3
21	SIERRA NEVADA HCS	579	5.9	421	8.1	3.1%	4.0%	18	5.3	17	5.6	0.9	0.7
22	GREATER LOS ANGELES HCS	1,196	25.5	926	32.9	3.9%	4.4%	47	<b><u>22.2</u></b>	41	<b><u>25.5</u></b>	0.9	0.8
22	LOMA LINDA	807	9.0	583	12.5	5.1%	6.5%	41	5.8	38	6.3	0.6	0.5
22	LONG BEACH HCS	581	11.0	421	15.2	4.0%	5.0%	23	5.8	21	6.4	0.5	0.4
22	SAN DIEGO HCS	777	14.7	586	19.5	2.6%	2.7%	20	10.0	16	12.4	0.7	0.6
22	SOUTHERN NEVADA HCS	498	6.2	386	8.0	7.4%	8.8%	37	5.6	34	6.1	0.9	0.8

Table 12. Comparison of Inpatient General Psychiatry Treatment and Treatment for PTSD, by VAMC, FY 2004. \*

VISN	VAMC	All General Psychiatry Inpatient Care				Percent Tx. for PTSD		Inpatient Treatment of PTSD				PTSD/General Psych Ratio	
		<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	All	Unique	<i>Episodes</i>	<i>Bed Days/</i>	<i>Unique</i>	<i>Bed Days/</i>	<i>of Bed Days per ...**</i>	
		<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episodes	Veterans	<i>of Care</i>	<i>Episode</i>	<i>Veterans</i>	<i>Vet/Year</i>	Episode	Vet/Year
23	BLACK HILLS HCS	279	11.3	196	16.1	8.6%	8.7%	24	9.4	17	13.3	0.8	0.8
23	CENTRAL IOWA HCS	404	5.4	315	7.0	4.5%	5.7%	18	3.8	18	3.8	0.7	0.5
23	FARGO	215	7.6	154	10.6	0.0%	0.0%					0.0	0.0
23	IOWA CITY	372	9.6	306	11.7	2.2%	2.3%	8	5.3	7	6.0	0.5	0.5
23	MINNEAPOLIS	647	9.4	498	12.2	2.3%	2.8%	15	7.2	14	7.7	0.8	0.6
23	NEBRASKA- WESTERN IOWA HCS	437	8.0	333	10.5	3.4%	4.5%	15	7.2	15	7.2	0.9	0.7
23	SIOUX FALLS	250	4.8	181	6.6	4.4%	4.4%	11	4.7	8	6.5	1.0	1.0
23	ST CLOUD	759	4.5	453	7.5	4.7%	6.0%	36	4.9	27	6.6	1.1	0.9
ALL VA		90,282	12.2	60,702	18.1	7.3%	9.0%	6,597	12.8	5,464	15.5	1.0	0.9
AVERAGE		806	12.2	582	16.6	7.3%	8.4%	59	10.0	50	11.5	0.8	0.7
SD		433	7.0	290	9.4	6.6%	7.1%	66	6.4	55	7.2	0.3	0.3
CV		0.54	0.57	0.50	0.56	0.90	0.84	1.12	0.64	1.10	0.63	0.40	0.41

\*Boded (underlined) values are 1 SD or more above the mean of all VISNs; outlined values are 1 SD or more below the mean.

† Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2004.

VISN VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	Ratio of Bed Days per ...*	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
1 BEDFORD	518	313	54.8	291	59.0	2.9%	3.1%	9	88.3	9	88.3	1.6	1.5
1 BOSTON HCS	523	499	68.3	429	79.5	3.2%	3.5%	16	96.3	15	102.7	1.4	1.3
1 CONNECTICUT HCS	689	27	93.2	27	93.2	0.0%	0.0%						
1 NORTHAMPTON	631	28	216.1	27	224.1	0.0%	0.0%						
2 BATH	514	2	1.0	2	1.0	0.0%	0.0%					0.0	0.0
2 WESTERN NEW YORK HCS	528	1,544	69.5	1,279	83.9	21.0%	19.4%	324	12.2	248	15.9	0.2	0.2
3 HUDSON VALLEY HCS	620	448	74.5	409	81.6	31.9%	33.5%	143	72.6	137	75.8	1.0	0.9
3 NEW JERSEY HCS	561	738	71.1	673	78.0	20.3%	21.2%	150	45.9	143	48.2	0.6	0.6
3 NEW YORK HARBOR HCS	630	708	35.2	595	41.9	2.4%	2.7%	17	53.6	16	57.0	1.5	1.4
3 NORTHPORT	632	104	107.0	96	116.0	18.3%	19.8%	19	82.8	19	82.8	0.8	0.7
4 BUTLER	529	196	94.9	190	97.9	0.0%	0.0%						
4 CLARKSBURG	540												
4 COATESVILLE	542	1,410	56.7	1,357	58.9	13.0%	13.0%	183	65.1	176		1.1	0.0
4 LEBANON	595	367	45.8	351	47.9	0.0%	0.0%						
4 PITTSBURGH HCS	646	406	41.9	393	43.3	0.5%	0.5%	2	8.0	2		0.2	0.0
4 WILKES BARRE	693	141	17.9	139	18.2	0.0%	0.0%						
5 MARTINSBURG	613	744	106.2	714	110.7	22.6%	23.1%	168	109.6	165	111.6	1.0	1.0
5 MARYLAND HCS	512	920	57.9	842	63.3	15.8%	16.4%	145	44.0	138	46.2	0.8	0.7
6 ASHEVILLE	637	221	25.8	213	26.7	0.5%	0.5%	1	28.0	1	28.0	1.1	1.0
6 HAMPTON	590	714	64.1	682	67.1	0.4%	0.4%	3	44.7	3		0.7	0.0
6 SALEM	658	243	22.4	230	23.7	0.0%	0.0%						
6 SALISBURY	659	262	35.3	261	35.4	0.0%	0.0%						
7 ATLANTA	508	22	178.4	21	186.9	0.0%	0.0%					0.0	0.0
7 AUGUSTA	509	211	82.7	207	84.3	37.0%	36.2%	78	72.2	75	75.1	0.9	0.9
7 BIRMINGHAM	521	12	94.8	11	103.4	0.0%	0.0%					0.0	0.0
7 CENTRAL ALABAMA VETERANS HCS	619	139	43.6	131	46.3	12.2%	12.2%	17	43.8	16	46.6	1.0	1.0
7 DUBLIN	557	369	51.0	344	54.7	26.6%	28.5%	98	46.7	98	46.7	0.9	0.9
7 TUSCALOOSA	679	95	5.8	93	5.9	2.1%	2.2%	2	6.0	2		1.0	0.0
8 BAY PINES	516	496	48.4	459	52.3	37.5%	39.7%	186	37.7	182	38.5	0.8	0.7
8 MIAMI	546	251	76.3	245	78.2	29.9%	30.2%	75	72.4	74	73.3	0.9	0.9
8 NO. FL/SO. GA VETERANS HS	573	156	62.1	134	72.3	0.0%	0.0%					0.0	0.0
8 TAMPA	673	66	142.0	66	142.0	4.5%	4.5%	3	170.7	3	170.7	1.2	1.2
9 MEMPHIS	614	333	12.4	326	12.6	0.0%	0.0%					0.0	0.0
9 MOUNTAIN HOME	621	513	134.3	487	141.4	1.2%	1.2%	6	172.5	6	172.5	1.3	1.2

Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2004.

VISN VAMC	CODE	All Domiciliary and PRRP Care				Percent Tx. for PTSD		Domiciliary and PRRP Tx. of PTSD				PTSD/Dom. and PRRP	
		Episodes	Bed Days/	Unique	Bed Days/	All	Unique	Episodes	Bed Days/	Unique	Bed Days/	Ratio of Bed Days per ...*	
		of Care	Episode	Veterans	Vet/Year	Episodes	Veterans	of Care	Episode	Veterans	Vet/Year	Episode	Vet/Year
10 CHILLICOTHE	538	895	22.9	674	30.5	4.6%	5.6%	41	15.1	38	16.3	0.7	0.5
10 CINCINNATI	539	614	44.1	464	58.4	9.4%	12.1%	58	42.9	56			
10 CLEVELAND	541	1,166	31.3	1,034	35.3	1.5%	1.7%	18	92.6	18		3.0	0.0
10 DAYTON	552	408	64.8	385	68.7	11.5%	11.9%	47	80.6	46	82.3	1.2	1.2
11 BATTLE CREEK	515	768	39.6	681	44.7	45.4%	41.0%	349	24.4	279	30.6	0.6	0.7
11 ILLIANA HCS	550	2	209.0	2	209.0	0.0%	0.0%						
11 INDIANAPOLIS	583	27	137.8	24	155.0	3.7%	4.2%	1	340.0	1			0.0
12 CHICAGO HCS	537	367	35.3	333	38.9	4.1%	4.5%	15	39.8	15		1.1	0.0
12 HINES	578	245	30.9	232	32.7	5.7%	6.0%	14	29.1	14	29.1	0.9	0.9
12 IRON MOUNTAIN	585	15	19.3	15	19.3	0.0%	0.0%					0.0	0.0
12 MADISON	607	59	84.6	55	90.7	3.4%	1.8%	2	15.0	1			
12 MILWAUKEE	695	484	114.2	474	116.6	5.8%	5.9%	28	150.0	28		1.3	0.0
12 NORTH CHICAGO	556	796	59.6	737	64.4	28.0%	28.8%	223	34.1	212	35.9	0.6	0.6
12 TOMAH	676	272	36.6	255	39.0	26.1%	26.7%	71	48.4	68	50.5	1.3	1.3
15 HEARTLAND-EAST HCS	657	4	143.0	4	143.0	0.0%	0.0%						
15 HEARTLAND-WEST	589	522	142.0	498	148.9	1.7%	1.4%	9	127.9	7	164.4	0.9	1.1
16 CENTRAL ARKANSAS HCS	598	568	44.1	529	47.4	28.3%	30.1%	161	42.4	159	43.0	1.0	0.9
16 GULF COAST HCS	520	530	108.4	514	111.8	1.3%	1.4%	7	94.3	7			
16 JACKSON	586	240	26.2	240	26.2	20.0%	20.0%	48	42.4	48	42.4	1.6	1.6
16 NEW ORLEANS	629	59	36.1	59	36.1	100.0%	100.0%	59	36.1	59	36.1	1.0	1.0
16 OKLAHOMA CITY	635	51	128.2	49	133.4	0.0%	0.0%						
17 CENTRAL TEXAS VETERANS HCS	674	767	111.2	720	118.5	20.2%	20.0%	155	89.2	144			
17 NORTH TEXAS HCS	549	1,157	56.5	784	83.4	0.2%	0.3%	2	192.5	2	192.5	3.4	2.3
17 SOUTH TEXAS VETERANS HCS	671	392	19.8	372	20.9	0.5%	0.5%	2	21.5	2			
18 NEW MEXICO HCS	501	87	80.8	78	90.2	2.3%	2.6%	2	76.0	2			
18 NORTHERN ARIZONA VA HCS	649	511	81.6	475	87.8	2.7%	2.9%	14	82.6	14			
18 SOUTHERN ARIZONA	678	147	21.2	145	21.5	0.0%	0.0%					0.0	0.0
19 SALT LAKE CITY HCS	660	169	26.5	162	27.7	0.0%	0.0%					0.0	0.0
19 SHERIDAN	666	225	41.3	210	44.3	30.2%	30.0%	68	40.0	63			
20 ALASKA HCS & RO	463	94	143.9	87	155.4	5.3%	5.7%	5	122.0	5			
20 BOISE	531	150	17.7	144	18.4	0.0%	0.0%					0.0	0.0
20 PUGET SOUND HCS	663	509	52.7	482	55.7	24.6%	25.3%	125	41.3	122			
20 ROSEBURG HCS	653	160	27.5	156	28.2	0.0%	0.0%						
20 WALLA WALLA	687	290	25.5	276	26.8	1.0%	1.1%	3	34.7	3	34.7	1.4	1.3
20 WHITE CITY	692	651	201.8	616	213.3	2.8%	2.9%	18	119.9	18	119.9	0.6	0.6



Table 12-2. Comparison of Domiciliary and PRRP Treatment and Treatment for PTSD, by VAMC, FY 2004.

VISN VAMC	CODE	<u>All Domiciliary and PRRP Care</u>				<u>Percent Tx. for PTSD</u>		<u>Domiciliary and PRRP Tx. of PTSD</u>				<u>PTSD/Dom. and PRRP</u>	
		<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>All Episodes</i>	<i>Unique Veterans</i>	<i>Episodes of Care</i>	<i>Bed Days/ Episode</i>	<i>Unique Veterans</i>	<i>Bed Days/ Vet/Year</i>	<i>Ratio of Bed Days per ...*</i>	<i>Episode Vet/Year</i>
21 HONOLULU	459	44	57.9	44	57.9	100.0%	100.0%	44	57.9	44	57.9	1.0	1.0
21 PALO ALTO HCS	640	604	87.0	563	93.3	39.6%	40.9%	239	58.3	230		0.7	0.0
21 SAN FRANCISCO	662	8	224.8	8	224.8	0.0%	0.0%					0.0	0.0
22 GREATER LOS ANGELES HCS	691	701	111.9	678	115.7	12.7%	12.8%	89	132.9	87			
23 BLACK HILLS HCS	568	581	79.4	518	89.0	10.5%	11.2%	61	103.0	58	108.3	1.3	1.2
23 CENTRAL IOWA HCS	555	2	23.0	2	23.0	0.0%	0.0%					0.0	0.0
23 NEBRASKA- WESTERN IOWA HCS	636	760	32.7	646	38.5	9.3%	9.9%	71	42.4	64	47.0	1.3	1.2
23 ST CLOUD	656	885	51.6	821	55.6	0.11	0.11	98	49.5	93	52.2	1.0	0.9
ALL VA		29,684	64.8	25,806	74.5	12.8%	13.3%	3,792	53.6	3,440	59.1	0.8	0.8
AVERAGE		391	71	355	76	11.5%	11.7%	70	72	65	71	0.9	0.6
SD		343	51	300	53	18.7%	18.8%	83	57	73	46	0.7	0.6
CV		0.88	0.72	0.85	0.69	1.62	1.60	1.18	0.79	1.11	0.65	0.78	0.90

\*Ratio of bed days of care for PTSD treatment compared to bed days of care for all general psychiatry inpatient treatment.

Data for TABLE 13 are not available for this fiscal year.
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Table 14. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004).\*

<i>VISN</i>	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Average Length Of Stay (Index stay)</i>	<i>Bed Days 6 months After DC</i>	<i>Number of Admissions 6 months After D/C</i>	<i>% Readm. within 14 days</i>	<i>% Readm. within 30 days</i>	<i>% Readm. within 180 days</i>	<i>Days to Readm. First Year After D/C</i>	<i>Inpatient Summary Score Average Z: Weighted</i>
1	269	16.4	6.9	0.37	1.9%	4.1%	29.0%	102.6	-0.01
2	41	7.2	3.4	0.34	2.4%	9.8%	24.4%	44.9	0.10
3	75	17.3	3.4	0.37	5.3%	9.3%	25.3%	74.5	0.09
4	118	18.5	3.0	0.30	4.2%	5.9%	20.3%	66.8	-0.10
5	67	6.1	4.0	0.52	10.4%	17.9%	31.3%	53.7	0.74
6	371	15.0	5.7	0.43	3.5%	7.0%	31.0%	80.2	0.35
7	222	8.3	3.1	0.35	4.5%	4.5%	26.1%	80.0	-0.45
8	110	5.0	2.1	0.38	5.5%	6.4%	20.9%	76.4	-0.60
9	129	8.4	4.2	0.49	6.2%	12.4%	32.6%	69.1	0.36
10	54	6.8	3.3	0.35	3.7%	5.6%	22.2%	66.3	-0.31
11	56	14.2	5.3	0.50	3.6%	10.7%	30.4%	56.1	0.81
12	68	9.4	4.4	0.46	11.8%	13.2%	30.9%	62.1	0.60
15	151	32.1	6.5	0.29	3.3%	6.6%	20.5%	65.3	0.85
16	157	11.6	4.6	0.35	3.2%	6.4%	24.2%	71.5	-0.04
17	106	17.9	2.9	0.33	2.8%	6.6%	25.5%	90.8	-0.40
18	114	10.2	2.1	0.30	4.4%	6.1%	21.9%	61.2	-0.36
19	122	8.4	2.4	0.15	2.5%	3.3%	11.5%	55.6	-0.79
20	295	15.4	2.1	0.18	3.1%	4.1%	14.6%	80.9	-0.87
21	59	11.2	2.4	0.32	1.7%	5.1%	16.9%	72.2	-0.56
22	67	7.9	3.1	0.40	6.0%	10.4%	28.4%	72.4	-0.10
23	40	6.1	3.8	0.63	10.0%	15.0%	35.0%	65.7	0.70
ALL VA	2,691	13.4	4.0	0.35	4.1%	6.8%	24.6%	75.9	-0.09
AVERAGE	128	12.1	3.7	0.37	4.8%	8.1%	24.9%	69.9	0.00
SD	90	6.3	1.4	0.11	2.8%	3.9%	6.2%	13.0	0.53
CV	0.70	0.52	0.37	0.29	0.59	0.48	0.25	0.19	

\* Outlined/highlighted values are 1 SD or more from the mean and reflect high levels of inpatient service use.

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004), by VAMC.\*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
1	BEDFORD	518	3	7.0	0.00	0.00	0.0%	0.0%	0.0%	
1	BOSTON HCS	523	27	12.3	5.37	0.59	3.7%	11.1%	33.3%	70.00
1	CONNECTICUT HCS	689	14	12.5	5.36	0.50	7.1%	7.1%	28.6%	73.25
1	NORTHAMPTON	631	182	20.0	8.18	0.32	1.6%	3.8%	28.6%	114.13
1	PROVIDENCE	650	18	7.4	2.33	0.44	0.0%	0.0%	33.3%	100.17
1	TOGUS	402	4	1.5	0.00	0.00	0.0%	0.0%	0.0%	
1	WHITE RIVER JCT	405	21	5.4	4.52	0.52	0.0%	0.0%	33.3%	77.14
2	ALBANY	500	7	3.4	1.43	0.43	0.0%	14.3%	42.9%	58.00
2	CANANDAIGUA	532	5	10.0	1.40	0.20	0.0%	0.0%	0.0%	
2	SYRACUSE	670	14	8.1	1.43	0.21	0.0%	7.1%	14.3%	64.50
2	WESTERN NEW YORK HCS	528	15	7.3	6.93	0.47	6.7%	13.3%	33.3%	29.20
3	BRONX	526	10	18.2	3.90	0.40	10.0%	10.0%	30.0%	76.00
3	HUDSON VALLEY HCS	620	17	34.3	2.53	0.41	11.8%	23.5%	29.4%	44.60
3	NEW JERSEY HCS	561	23	11.0	3.43	0.35	4.3%	4.3%	21.7%	90.60
3	NEW YORK HARBOR HCS	630	23	9.3	4.09	0.39	0.0%	4.3%	26.1%	85.17
3	NORTHPORT	632	2	33.0	0.00	0.00	0.0%	0.0%	0.0%	
4	CLARKSBURG	540	42	33.7	1.67	0.17	2.4%	4.8%	11.9%	77.00
4	COATESVILLE	542	22	12.9	1.68	0.18	0.0%	0.0%	13.6%	88.67
4	LEBANON	595	12	8.1	2.33	0.33	16.7%	16.7%	33.3%	63.75
4	PHILADELPHIA	642	27	11.7	6.63	0.52	3.7%	3.7%	29.6%	62.38
4	PITTSBURGH HCS	646	11	5.0	3.18	0.55	9.1%	18.2%	36.4%	49.75
4	WILKES BARRE	693	4	5.3	0.00	0.00	0.0%	0.0%	0.0%	
5	MARTINSBURG	613	23	6.4	4.39	0.87	8.7%	30.4%	43.5%	38.00
5	MARYLAND HCS	512	31	5.8	2.48	0.23	6.5%	6.5%	19.4%	81.67
5	WASHINGTON DC	688	13	6.2	6.85	0.62	23.1%	23.1%	38.5%	51.40
6	ASHEVILLE	637	36	10.6	2.17	0.28	2.8%	8.3%	19.4%	80.29
6	DURHAM	558	39	6.8	3.44	0.51	7.7%	15.4%	30.8%	55.75
6	FAYETTEVILLE NC	565	22	6.3	1.91	0.32	0.0%	4.5%	22.7%	101.60
6	HAMPTON	590	77	6.9	5.97	0.77	7.8%	14.3%	44.2%	75.76
6	RICHMOND	652	14	9.0	1.93	0.36	0.0%	14.3%	28.6%	73.25
6	SALEM	658	107	11.9	12.48	0.49	2.8%	2.8%	47.7%	87.69
6	SALISBURY	659	76	37.4	0.57	0.11	0.0%	0.0%	2.6%	73.50
7	ATLANTA	508	40	8.7	3.30	0.38	5.0%	5.0%	30.0%	64.67
7	AUGUSTA	509	75	7.6	3.55	0.43	6.7%	6.7%	29.3%	71.41
7	CENTRAL ALABAMA VETERANS HCS	619	50	8.7	3.88	0.38	6.0%	6.0%	30.0%	91.33
7	CHARLESTON	534	17	7.9	0.35	0.24	0.0%	0.0%	17.6%	115.67
7	COLUMBIA SC	544	27	8.2	0.48	0.11	0.0%	0.0%	7.4%	161.00
7	TUSCALOOSA	679	13	10.8	6.38	0.38	0.0%	0.0%	30.8%	63.75

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004), by VAMC.\*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
8	BAY PINES	516	24	3.8	0.96	0.08	0.0%	0.0%	8.3%	146.00
8	MIAMI	546	8	7.0	4.25	0.50	12.5%	12.5%	25.0%	17.00
8	NO. FL/SO. GA VETERANS HS	573	14	3.2	1.64	0.36	0.0%	0.0%	28.6%	133.25
8	SAN JUAN PR	672	3	14.0	0.00	0.00	0.0%	0.0%	0.0%	
8	TAMPA	673	22	6.2	0.50	0.09	4.5%	4.5%	9.1%	34.50
8	W PALM BEACH	548	39	4.5	3.59	0.74	10.3%	12.8%	33.3%	63.77
9	LEXINGTON	596	9	7.7	1.56	0.33	11.1%	11.1%	22.2%	26.00
9	LOUISVILLE	603	9	5.7	0.00	0.00	0.0%	0.0%	0.0%	
9	MEMPHIS	614	34	10.1	4.03	0.44	2.9%	14.7%	32.4%	67.09
9	MIDDLE TENN HCS	626	31	10.0	6.61	0.61	3.2%	9.7%	41.9%	96.54
9	MOUNTAIN HOME	621	46	6.7	4.07	0.57	10.9%	15.2%	34.8%	53.63
10	CHILLICOTHE	538	22	4.5	0.09	0.05	0.0%	0.0%	4.5%	46.00
10	CINCINNATI	539	16	9.6	6.56	0.69	0.0%	0.0%	37.5%	97.00
10	CLEVELAND	541	6	9.2	1.67	0.33	16.7%	33.3%	33.3%	9.50
10	DAYTON	552	10	5.6	6.30	0.50	10.0%	10.0%	30.0%	49.33
11	ALLEN PARK	553	3	6.7	4.67	0.67	0.0%	0.0%	33.3%	97.00
11	ANN ARBOR HCS	506	7	8.9	2.57	0.29	0.0%	14.3%	28.6%	47.50
11	BATTLE CREEK	515	28	16.2	6.96	0.68	7.1%	14.3%	39.3%	49.73
11	ILLIANA HCS	550	5	9.2	2.20	0.40	0.0%	0.0%	20.0%	82.00
11	INDIANAPOLIS	583	5	6.0	0.00	0.00	0.0%	0.0%	0.0%	
11	NORTHERN INDIANA HCS	610	8	23.3	7.00	0.38	0.0%	12.5%	25.0%	66.50
12	CHICAGO HCS	537	28	12.9	6.14	0.61	17.9%	21.4%	35.7%	61.90
12	HINES	578	8	10.9	1.00	0.25	0.0%	0.0%	12.5%	63.00
12	MADISON	607	5	7.8	4.00	0.80	0.0%	0.0%	40.0%	98.00
12	MILWAUKEE	695	8	4.9	4.63	0.25	0.0%	0.0%	25.0%	58.50
12	NORTH CHICAGO	556	17	6.3	3.65	0.35	17.6%	17.6%	35.3%	51.50
12	TOMAH	676	2	4.0	0.00	0.00	0.0%	0.0%	0.0%	
15	COLUMBIA MO	543	17	7.5	1.47	0.35	5.9%	5.9%	23.5%	41.75
15	EASTERN KANSAS HCS	677	94	46.8	9.05	0.28	2.1%	5.3%	21.3%	82.30
15	HEARTLAND-EAST HCS	657	34	8.5	3.06	0.35	5.9%	11.8%	20.6%	30.00
15	HEARTLAND-WEST	589	6	5.2	0.00	0.00	0.0%	0.0%	0.0%	
16	ALEXANDRIA	502	5	22.8	17.80	0.80	0.0%	0.0%	40.0%	55.00
16	CENTRAL ARKANSAS HCS	598	32	17.5	8.81	0.59	6.3%	15.6%	34.4%	56.09
16	FAYETTEVILLE AR	564	13	4.8	0.69	0.23	0.0%	0.0%	15.4%	116.50
16	GULF COAST HCS	520	32	12.6	6.03	0.34	6.3%	12.5%	28.1%	67.78
16	HOUSTON	580	28	6.4	0.86	0.18	0.0%	0.0%	14.3%	84.50
16	JACKSON	586	9	11.4	3.44	0.33	0.0%	0.0%	33.3%	81.00
16	NEW ORLEANS	629	23	9.9	2.00	0.26	0.0%	0.0%	17.4%	72.00
16	OKLAHOMA CITY	635	13	12.2	3.23	0.31	7.7%	7.7%	23.1%	93.00
16	SHREVEPORT	667	2	4.5	0.00	0.00	0.0%	0.0%	0.0%	

Table 15. Inpatient treatment received during the first six months after discharge among veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004), by VAMC.\*

VISN	STATION	CODE	Number of Unique Patients w PTSD Dx.	Average Length Of Stay (Index stay)	Bed Days 6 months After DC	Number of Admissions 6 months After D/C	% Readm. within 14 days	% Readm. within 30 days	% Readm. within 180 days	Days to Readm. First Year After D/C
17	CENTRAL TEXAS VETERANS HCS	674	42	32.3	2.71	0.26	0.0%	2.4%	19.0%	109.00
17	NORTH TEXAS HCS	549	11	7.2	0.82	0.09	0.0%	9.1%	9.1%	27.00
17	SOUTH TEXAS VETERANS HCS	671	53	8.7	3.53	0.43	5.7%	9.4%	34.0%	86.28
18	NEW MEXICO HCS	501	25	6.9	2.12	0.36	4.0%	8.0%	28.0%	69.71
18	PHOENIX	644	34	5.8	2.21	0.38	8.8%	11.8%	26.5%	45.89
18	SOUTHERN ARIZONA	678	55	14.4	2.13	0.22	1.8%	1.8%	16.4%	69.78
19	DENVER	554	81	5.8	1.67	0.07	2.5%	3.7%	7.4%	46.83
19	GRAND JUNCTION	575	8	10.1	3.63	0.38	0.0%	0.0%	25.0%	97.50
19	SALT LAKE CITY HCS	660	9	8.3	0.44	0.11	0.0%	0.0%	11.1%	120.00
19	SHERIDAN	666	24	16.4	5.17	0.33	4.2%	4.2%	20.8%	36.60
20	BOISE	531	17	21.7	2.12	0.29	5.9%	11.8%	23.5%	51.25
20	PORTLAND	648	14	11.8	1.50	0.21	0.0%	0.0%	21.4%	69.33
20	PUGET SOUND HCS	663	184	12.5	1.32	0.15	3.3%	4.3%	10.9%	65.30
20	ROSEBURG HCS	653	72	22.8	3.97	0.22	1.4%	1.4%	19.4%	115.00
20	SPOKANE	668	3	11.7	7.33	0.67	33.3%	33.3%	33.3%	9.00
20	WALLA WALLA	687	5	5.4	2.00	0.20	0.0%	0.0%	20.0%	140.00
21	CENTRAL CALIFORNIA HCS	570	4	6.3	0.00	0.00	0.0%	0.0%	0.0%	
21	HONOLULU	459	11	10.4	0.64	0.27	0.0%	0.0%	9.1%	42.00
21	PALO ALTO HCS	640	34	13.7	2.97	0.38	2.9%	5.9%	23.5%	82.00
21	SAN FRANCISCO	662	4	6.0	7.75	0.75	0.0%	25.0%	25.0%	24.00
21	SIERRA NEVADA HCS	654	6	5.3	0.00	0.00	0.0%	0.0%	0.0%	
22	GREATER LOS ANGELES HCS	691	16	14.3	4.94	0.50	0.0%	6.3%	37.5%	102.50
22	LOMA LINDA	605	14	4.1	0.64	0.07	7.1%	7.1%	7.1%	12.00
22	LONG BEACH HCS	600	11	7.8	2.45	0.64	18.2%	18.2%	36.4%	46.25
22	SAN DIEGO HCS	664	7	8.3	4.71	0.57	14.3%	14.3%	42.9%	74.67
22	SOUTHERN NEVADA HCS	593	19	5.2	3.11	0.37	0.0%	10.5%	26.3%	67.80
23	BLACK HILLS HCS	568	6	10.5	0.67	0.17	0.0%	0.0%	16.7%	174.00
23	CENTRAL IOWA HCS	555	8	3.8	0.38	0.13	0.0%	0.0%	12.5%	136.00
23	IOWA CITY	584	5	6.0	3.80	0.40	0.0%	0.0%	40.0%	41.00
23	MINNEAPOLIS	618	4	6.3	2.75	0.50	25.0%	25.0%	50.0%	23.00
23	NEBRASKA- WESTERN IOWA HCS	636	2	2.5	0.00	0.00	0.0%	0.0%	0.0%	
23	SIOUX FALLS	438	3	5.0	5.67	1.00	0.0%	0.0%	66.7%	155.50
23	ST CLOUD	656	12	6.3	8.25	1.33	25.0%	41.7%	50.0%	28.50
ALL VA			2691	13.4	4.04	0.35	4.1%	6.8%	24.6%	75.90
AVERAGE			24	10.4	3.23	0.35	4.3%	7.2%	23.4%	71.90
SD			30	7.7	2.88	0.24	6.4%	8.6%	14.0%	33.47
CV			1.23	0.74	0.89	0.69	1.50	1.20	0.60	0.47

\* Outlined values are 1 SD or more from the mean in the undesirable direction, and reflect high levels of inpatient service use.

Table 16. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004.)\*

<i>VISN</i>	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w any Visits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: Psychiatric &amp; SA Disorders</i>	<i>Any SA Outpatient Visit in 30 Days After DC</i>	<i>Number of SA OP Visits Among those w any Visits</i>	<i>Outpatient Summary Score Average Z Score</i>
1	90.3%	67.5%	26.92	11.38	2.41	56.1%	9.7%	12.70	-0.43
2	92.7%	80.5%	15.13	23.76	2.51	51.2%	17.1%	33.29	0.97
3	92.0%	70.7%	25.77	23.22	2.49	61.3%	21.3%	34.27	0.59
4	91.5%	60.2%	31.47	8.83	2.47	52.5%	16.1%	15.49	-0.38
5	88.1%	64.2%	25.88	21.85	2.72	47.8%	29.9%	20.54	0.49
6	90.8%	61.1%	33.52	8.10	2.46	26.1%	7.3%	12.25	-0.71
7	91.9%	69.4%	27.16	16.96	2.40	36.0%	5.9%	19.52	-0.22
8	89.1%	67.3%	26.82	11.97	2.57	46.4%	15.5%	12.46	-0.17
9	89.1%	64.3%	31.39	6.56	2.39	40.3%	10.9%	42.75	-0.31
10	94.4%	85.2%	14.86	32.98	2.67	51.9%	25.9%	31.11	1.66
11	89.3%	58.9%	31.92	9.76	2.36	48.2%	10.7%	7.77	-0.89
12	83.8%	61.8%	30.23	28.67	2.35	69.1%	23.5%	38.91	-0.12
15	90.7%	70.2%	25.19	13.47	2.35	47.0%	9.9%	31.07	-0.10
16	90.3%	63.2%	29.29	11.71	2.39	56.1%	12.9%	13.06	-0.51
17	85.8%	67.0%	27.13	7.99	2.35	46.2%	14.2%	23.36	-0.59
18	91.2%	77.0%	19.28	9.38	2.54	43.9%	9.7%	15.64	0.13
19	93.4%	83.6%	12.81	22.01	2.50	41.0%	13.9%	14.88	0.75
20	88.4%	63.3%	29.28	12.23	2.39	42.7%	15.6%	19.88	-0.45
21	91.5%	64.4%	31.26	13.02	2.42	67.8%	23.7%	22.76	-0.03
22	89.4%	62.1%	31.14	10.41	2.23	44.8%	6.1%	13.73	-0.98
23	92.5%	80.0%	15.35	38.38	2.55	55.0%	20.0%	33.46	1.29
All VA	90.2%	67.1%	27.29	13.63	2.44	45.3%	12.9%	21.05	0.00
AVG	90.3%	68.7%	25.8	16.3	2.45	49.1%	15.2%	22.3	0.00
SD	2.5%	8.0%	6.4	8.9	0.11	10.0%	6.7%	10.2	0.71
CV	0.03	0.12	0.25	0.55	0.05	0.20	0.44	0.45	

\* Outlined values are 1 SD from the mean (in the undesirable direction) of all VAMCs, and reflect low outpatient service use after discharge from inpatient treatment.

Table 16A. Deviation of outpatient continuity of care from that of the median VISN over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by VISN, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

VISN												Dropout		Summary				
		Number of O/P Stops	Number of Days with O/P Stops		Continuity: Bi-months with 2 stops		Continuity: Months with any stops		(6 months with no O/P visit)		Continuity of Care Index		Modified MCI	Number of Providers	Continuity of Outpatient Care (Avg Z)			
VISN Median		13.83	9.82		2.56		3.89		0.14		0.55		0.81	3.26				
VA National Avg.		12.60	10.06		2.58		4.01		0.12		0.57		0.79	2.58				
50	1	-0.43	0.85		0.08		0.26		-0.03		0.05		X	0.02	-0.01	0.80		
	2	2.97	2.94		0.13		0.42		-0.04		0.04		X	0.04	0.02	1.57		
	3	1.33	0.48		0.09		0.20		-0.02		0.09		X	0.06	-0.31	1.06		
	4	-4.02	X	-2.62	X	0.03	-0.02		-0.01		0.04		X		-0.27	-0.21		
	5	0.07	0.26		-0.02		-0.05		0.03		X	0.05	X	0.01		-0.19		
	6	-3.58	X	-2.13	X	-0.02	-0.15		X	-0.01	0.06		X	0.01	-0.37	-0.33		
	7	-2.73	X	-1.80	X	-0.03	X	-0.08	X	0.01	X	-0.05		-0.06	X	0.14	-1.03	
	8	-3.28	X	-2.63	X	-0.05	X	-0.22	X	0.02	X	0.05	X	-0.01	X	-0.22	-0.81	
	9	-3.50	X	-2.24	X	-0.01	-0.05		0.00		-0.02		-0.06		X	-0.14	-0.79	
	10	1.28	0.62		0.04		0.20		-0.01		-0.01		-0.02		X	0.28	0.28	
	11	0.82	0.56		0.01		0.01				0.03		X	0.00	0.10	0.13		
	12	7.58	3.68		0.02		0.14		-0.01		0.03		X	0.02	0.10	0.93		
	15	1.59	0.74		0.03		0.04		-0.02		-0.02		-0.04		X	0.14	0.06	
	16	-2.45	X	-1.37	X					0.01		-0.04		-0.06		X	0.08	-0.73
	17	-3.00	X	-1.23	X	-0.07	X	-0.17	X	0.01	0.04		X	-0.02	X	-0.24	-0.70	
	18	-3.12	X	-2.30	X	-0.04	X	-0.11	X	0.02	X	-0.06	-0.08		X	0.28	-1.31	
	19	-0.34	0.33		0.06		0.29		0.00				0.00		0.07		0.30	
	20	-1.53	X			0.09		0.26		-0.02		0.08		X	0.04	-0.20	0.83	
	21	-2.90	X	-1.50	X	0.04	0.12		0.00		0.02		X	-0.01	X	-0.12	-0.11	
	22		-0.28		0.02		0.01		0.01		0.00		-0.03		X	0.19	-0.22	
	23	4.83	1.23		0.03		0.09		-0.03		-0.04		-0.04		X	0.63	0.38	

X = Significantly different ( $p < .05$ ) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.



Table 16B. Outpatient continuity of care over the first six months of treatment in FY 2004 among patients with PTSD (ICD-9 code 309.81), by VISN.

VISN	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	6,993	12.97	10.87	2.62	4.19	0.12	0.62	0.83	2.47
2	3,556	14.94	11.92	2.67	4.36	0.10	0.60	0.84	2.63
3	5,459	18.26	14.04	2.67	4.36	0.10	0.64	0.86	2.51
4	5,698	10.37	8.67	2.59	3.97	0.10	0.60	0.81	2.27
5	2,465	18.49	13.71	2.56	4.07	0.18	0.54	0.80	3.26
6	6,106	8.20	7.33	2.49	3.63	0.11	0.61	0.79	2.15
7	8,964	12.89	9.65	2.55	3.90	0.12	0.48	0.72	3.00
8	7,587	9.41	7.93	2.55	3.79	0.13	0.60	0.79	2.27
9	4,161	7.56	6.32	2.49	3.66	0.11	0.54	0.73	2.21
10	4,197	16.64	12.03	2.58	4.14	0.13	0.53	0.78	3.04
11	2,971	12.26	9.86	2.56	3.96	0.14	0.53	0.76	2.82
12	3,551	18.88	13.56	2.64	4.28	0.11	0.57	0.81	2.93
15	4,387	12.85	10.03	2.62	4.08	0.11	0.53	0.76	2.61
16	9,794	11.85	9.46	2.56	3.89	0.13	0.53	0.75	2.59
17	4,880	10.52	9.27	2.53	3.93	0.13	0.60	0.79	2.32
18	5,729	9.68	8.25	2.55	3.85	0.15	0.54	0.76	2.63
19	3,888	12.78	10.65	2.64	4.26	0.13	0.55	0.80	2.62
20	7,397	11.51	9.82	2.61	4.13	0.13	0.64	0.84	2.38
21	5,659	12.10	10.26	2.58	4.03	0.14	0.62	0.82	2.37
22	5,615	13.83	11.53	2.59	4.03	0.13	0.61	0.82	2.63
23	4,024	18.62	11.82	2.60	4.07	0.11	0.50	0.77	3.33
ALL VA	113,081	12.60	10.06	2.58	4.01	0.12	0.57	0.79	2.58
AVG	5,385	13.08	10.33	2.58	4.03	0.12	0.57	0.79	2.62
SD	1,922	3.44	2.07	0.05	0.20	0.02	0.05	0.04	0.33
CV	0.36	0.26	0.20	0.02	0.05	0.15	0.08	0.05	0.13

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004). \*

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
1	BEDFORD	518	66.7%	33.3%	33.0	13.0	2.3	33.3%	0.0%	
1	BOSTON HCS	523	88.5%	80.8%	11.8	14.1	2.2	81.5%	15.4%	12.7
1	CONNECTICUT HCS	689	92.9%	92.9%	6.2	26.2	2.9	57.1%	28.6%	10.6
1	NORTHAMPTON	631	89.6%	62.6%	31.3	9.1	2.4	57.1%	7.7%	13.5
1	PROVIDENCE	650	94.4%	61.1%	33.3	11.4	2.5	50.0%	16.7%	14.0
1	TOGUS	402	100.0%	100.0%	11.3	21.5	2.5	0.0%	0.0%	
1	WHITE RIVER JCT	405	95.2%	81.0%	19.2	15.2	2.5	33.3%	4.8%	2.0
2	ALBANY	500	100.0%	100.0%	11.4	18.0	2.9	28.6%	0.0%	
2	CANANDAIGUA	532	100.0%	80.0%	20.8	24.0	2.6	80.0%	20.0%	18.0
2	SYRACUSE	670	85.7%	71.4%	12.9	13.8	2.2	50.0%	28.6%	33.8
2	WESTERN NEW YORK HCS	528	93.3%	80.0%	16.9	35.1	2.6	53.3%	13.3%	40.0
3	BRONX	526	90.0%	70.0%	32.3	17.1	2.4	50.0%	10.0%	8.0
3	HUDSON VALLEY HCS	620	88.2%	76.5%	17.1	42.2	2.6	76.5%	41.2%	66.4
3	NEW JERSEY HCS	561	95.7%	82.6%	20.0	18.7	2.7	43.5%	17.4%	18.2
3	NEW YORK HARBOR HCS	630	91.3%	52.2%	37.1	17.6	2.2	73.9%	13.0%	17.3
3	NORTHPORT	632	100.0%	100.0%	4.5	17.0	3.0	50.0%	50.0%	39.0
4	CLARKSBURG	540	100.0%	83.3%	13.1	8.6	2.8	26.2%	9.5%	2.1
4	COATESVILLE	542	77.3%	22.7%	70.4	5.8	2.0	81.8%	18.2%	8.8
4	LEBANON	595	100.0%	75.0%	27.3	11.9	2.7	50.0%	0.0%	13.0
4	PHILADELPHIA	642	88.9%	51.9%	37.7	11.0	2.4	66.7%	29.6%	29.4
4	PITTSBURGH HCS	646	90.9%	54.5%	35.2	6.5	2.4	81.8%	27.3%	10.0
4	WILKES BARRE	693	75.0%	50.0%	22.7	7.0	2.5	0.0%	0.0%	
5	MARTINSBURG	613	87.0%	47.8%	40.7	5.5	2.7	56.5%	30.4%	22.0
5	MARYLAND HCS	512	87.1%	71.0%	19.4	32.1	2.6	45.2%	32.3%	15.8
5	WASHINGTON DC	688	92.3%	76.9%	15.8	26.1	2.8	38.5%	23.1%	28.8
6	ASHEVILLE	637	88.9%	58.3%	32.3	6.9	2.6	16.7%	2.8%	15.5
6	DURHAM	558	87.2%	69.2%	25.6	7.5	2.4	59.0%	15.4%	6.7
6	FAYETTEVILLE NC	565	90.9%	54.5%	35.7	8.7	2.4	27.3%	4.5%	11.3
6	HAMPTON	590	80.5%	40.3%	51.3	6.1	2.1	70.1%	15.6%	16.0
6	RICHMOND	652	92.9%	50.0%	42.0	10.5	2.4	21.4%	28.6%	24.8
6	SALEM	658	93.4%	65.1%	31.8	5.4	2.5	4.7%	2.8%	5.0
6	SALISBURY	659	100.0%	77.6%	23.4	13.5	2.8	0.0%	0.0%	1.0
7	ATLANTA	508	85.0%	65.0%	20.4	15.3	2.2	52.5%	12.5%	14.9
7	AUGUSTA	509	94.7%	69.3%	31.9	21.9	2.5	34.7%	5.3%	28.8

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004). \*

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
7	CENTRAL ALABAMA VETERANS HCS	619	88.0%	60.0%	30.3	15.8	2.2	16.0%	4.0%	19.1
7	CHARLESTON	534	94.1%	70.6%	32.5	10.4	2.4	52.9%	0.0%	1.0
7	COLUMBIA SC	544	96.3%	85.2%	20.2	12.6	2.6	25.9%	3.7%	1.5
7	TUSCALOOSA	679	100.0%	84.6%	15.8	14.8	2.9	69.2%	7.7%	34.0
8	BAY PINES	516	75.0%	45.8%	35.8	14.4	2.4	62.5%	8.3%	22.0
8	MIAMI	546	75.0%	75.0%	6.0	15.2	2.1	50.0%	0.0%	
8	NO. FL/SO. GA VETERANS HS	573	92.9%	71.4%	22.7	6.5	2.9	21.4%	7.1%	15.7
8	SAN JUAN PR	672	100.0%	100.0%	16.7	10.7	3.0	0.0%	0.0%	
8	TAMPA	673	95.5%	72.7%	20.9	8.1	2.5	40.9%	18.2%	3.5
8	W PALM BEACH	548	94.9%	71.8%	31.5	14.5	2.7	51.3%	25.6%	12.3
9	LEXINGTON	596	100.0%	55.6%	27.1	8.2	2.6	44.4%	33.3%	69.7
9	LOUISVILLE	603	88.9%	55.6%	37.8	4.9	2.8	44.4%	0.0%	2.0
9	MEMPHIS	614	88.2%	73.5%	26.1	9.7	2.3	52.9%	20.6%	35.0
9	MIDDLE TENN HCS	626	93.5%	51.6%	44.7	6.2	2.5	38.7%	6.5%	66.0
9	MOUNTAIN HOME	621	84.8%	69.6%	25.2	4.4	2.3	30.4%	4.3%	32.0
10	CHILLICOTHE	538	95.5%	95.5%	3.8	26.1	2.7	50.0%	13.6%	27.3
10	CINCINNATI	539	93.8%	62.5%	34.5	44.9	2.3	62.5%	50.0%	37.9
10	CLEVELAND	541	100.0%	100.0%	10.7	21.7	3.0	50.0%	16.7%	1.7
10	DAYTON	552	90.0%	90.0%	10.7	36.6	3.0	40.0%	20.0%	45.3
11	ALLEN PARK	553	66.7%	66.7%	13.5	4.5	2.3	66.7%	33.3%	6.5
11	ANN ARBOR HCS	506	85.7%	42.9%	27.0	4.3	2.1	85.7%	28.6%	9.0
11	BATTLE CREEK	515	92.9%	53.6%	37.7	10.6	2.3	50.0%	7.1%	9.8
11	ILLIANA HCS	550	100.0%	80.0%	41.4	13.2	2.8	40.0%	20.0%	9.0
11	INDIANAPOLIS	583	100.0%	80.0%	15.2	7.8	2.4	40.0%	0.0%	
11	NORTHERN INDIANA HCS	610	75.0%	62.5%	24.2	12.0	2.4	12.5%	0.0%	2.0
12	CHICAGO HCS	537	82.1%	53.6%	42.5	23.3	2.2	85.7%	21.4%	41.8
12	HINES	578	87.5%	75.0%	20.4	26.1	2.6	75.0%	50.0%	30.3
12	MADISON	607	100.0%	80.0%	38.0	20.2	3.0	20.0%	20.0%	1.0
12	MILWAUKEE	695	87.5%	75.0%	15.0	20.3	2.6	50.0%	12.5%	2.0
12	NORTH CHICAGO	556	76.5%	52.9%	22.5	49.9	2.1	64.7%	17.6%	35.3
12	TOMAH	676	100.0%	100.0%	7.5	11.0	2.5	50.0%	50.0%	131.0
15	COLUMBIA MO	543	100.0%	52.9%	32.9	7.9	2.7	29.4%	5.9%	1.3
15	EASTERN KANSAS HCS	677	92.6%	75.5%	22.9	15.1	2.4	53.2%	13.8%	31.6
15	HEARTLAND-EAST HCS	657	82.4%	67.6%	26.9	13.3	2.2	35.3%	2.9%	50.8

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004). \*

VISN	STATION	CODE	Any Psych. Outpatient Visit in 6 mos. After DC	Any Psych. Outpatient Visit in 30 Days After DC	Days to 1st OP Visit in 6 mos. After DC	Number of Visits in 6 mos. Among those w Any Visits	Continuity: Bi-months with 2 Visits	Dually Diagnosed: PTSD and SA Disorder	Any SA Outpatient Visit in 30 days After DC	Number of SA OP Visits in 6 mos. Among those w Any Visits
15	HEARTLAND-WEST	589	83.3%	50.0%	28.8	4.8	1.5	66.7%	0.0%	
16	ALEXANDRIA	502	100.0%	80.0%	37.8	8.0	2.8	80.0%	0.0%	8.0
16	CENTRAL ARKANSAS HCS	598	87.5%	56.3%	34.7	12.1	2.3	78.1%	15.6%	15.8
16	FAYETTEVILLE AR	564	92.3%	76.9%	15.8	11.5	2.8	53.8%	38.5%	7.8
16	GULF COAST HCS	520	86.7%	50.0%	41.4	11.2	2.1	68.8%	16.7%	16.9
16	HOUSTON	580	92.9%	75.0%	17.7	13.7	2.4	28.6%	3.6%	1.3
16	JACKSON	586	100.0%	77.8%	26.3	8.9	2.6	33.3%	22.2%	18.7
16	NEW ORLEANS	629	87.0%	60.9%	25.7	13.9	2.4	56.5%	4.3%	11.5
16	OKLAHOMA CITY	635	92.3%	53.8%	36.4	4.9	2.4	46.2%	7.7%	10.0
16	SHREVEPORT	667	100.0%	100.0%	11.5	30.5	2.5	0.0%	0.0%	
17	CENTRAL TEXAS VETERANS HCS	674	90.5%	71.4%	25.6	8.3	2.3	45.2%	21.4%	22.2
17	NORTH TEXAS HCS	549	72.7%	54.5%	47.9	6.1	2.0	72.7%	36.4%	36.6
17	SOUTH TEXAS VETERANS HCS	671	84.9%	66.0%	24.7	8.0	2.5	41.5%	3.8%	13.0
18	NEW MEXICO HCS	501	88.0%	72.0%	21.5	12.2	2.5	52.0%	12.0%	21.0
18	PHOENIX	644	91.2%	67.6%	21.4	8.1	2.6	38.2%	14.7%	11.8
18	SOUTHERN ARIZONA	678	92.6%	85.2%	17.0	8.9	2.5	43.6%	5.6%	16.0
19	DENVER	554	93.8%	87.7%	7.8	26.7	2.5	38.3%	7.4%	15.9
19	GRAND JUNCTION	575	100.0%	75.0%	29.9	6.1	2.8	25.0%	12.5%	10.0
19	SALT LAKE CITY HCS	660	77.8%	66.7%	19.3	12.1	1.9	77.8%	33.3%	7.7
19	SHERIDAN	666	95.8%	79.2%	21.4	15.1	2.7	41.7%	29.2%	16.3
20	BOISE	531	94.1%	64.7%	23.2	12.3	2.5	64.7%	17.6%	28.0
20	PORTLAND	648	100.0%	78.6%	15.4	11.3	2.5	71.4%	7.1%	5.0
20	PUGET SOUND HCS	663	84.7%	62.8%	28.0	14.6	2.3	46.7%	21.9%	22.6
20	ROSEBURG HCS	653	94.4%	62.5%	35.9	7.7	2.5	25.0%	2.8%	9.9
20	SPOKANE	668	100.0%	66.7%	19.7	9.7	3.0	0.0%	0.0%	
20	WALLA WALLA	687	80.0%	40.0%	45.0	5.0	3.0	20.0%	0.0%	5.0
21	CENTRAL CALIFORNIA HCS	570	100.0%	75.0%	23.0	5.8	2.8	25.0%	25.0%	152.0
21	HONOLULU	459	90.9%	72.7%	18.4	30.6	2.1	45.5%	0.0%	
21	PALO ALTO HCS	640	91.2%	64.7%	34.6	10.8	2.5	73.5%	32.4%	18.5
21	SAN FRANCISCO	662	100.0%	100.0%	15.0	2.8	2.5	100.0%	25.0%	21.0
21	SIERRA NEVADA HCS	654	83.3%	16.7%	55.8	5.8	2.2	83.3%	16.7%	6.8
22	GREATER LOS ANGELES HCS	691	87.5%	56.3%	43.9	8.6	2.0	62.5%	0.0%	1.0
22	LOMA LINDA	605	85.7%	71.4%	24.9	10.0	2.2	21.4%	0.0%	
22	LONG BEACH HCS	600	81.8%	63.6%	19.6	18.2	2.4	63.6%	18.2%	34.7

Table 17. Outpatient treatment received during the first six months after discharge by veterans discharged from VA psychiatric programs with a primary diagnosis of PTSD (October 1, 2003-March 31, 2004). \*

VISN	STATION	CODE	<i>Any Psych. Outpatient Visit in 6 mos. After DC</i>	<i>Any Psych. Outpatient Visit in 30 Days After DC</i>	<i>Days to 1st OP Visit in 6 mos. After DC</i>	<i>Number of Visits in 6 mos. Among those w Any Visits</i>	<i>Continuity: Bi-months with 2 Visits</i>	<i>Dually Diagnosed: PTSD and SA Disorder</i>	<i>Any SA Outpatient Visit in 30 days After DC</i>	<i>Number of SA OP Visits in 6 mos. Among those w Any Visits</i>
22	SAN DIEGO HCS	664	100.0%	42.9%	37.4	9.9	2.7	71.4%	14.3%	14.0
22	SOUTHERN NEVADA HCS	593	94.4%	66.7%	28.5	8.2	2.2	26.3%	5.6%	1.0
23	BLACK HILLS HCS	568	100.0%	83.3%	13.8	32.7	3.0	50.0%	66.7%	15.0
23	CENTRAL IOWA HCS	555	87.5%	87.5%	5.1	47.9	2.5	37.5%	12.5%	83.0
23	IOWA CITY	584	100.0%	100.0%	13.0	15.2	2.4	60.0%	40.0%	60.0
23	MINNEAPOLIS	618	75.0%	50.0%	21.7	33.0	2.3	50.0%	0.0%	2.0
23	NEBRASKA- WESTERN IOWA HCS	636	100.0%	100.0%	2.0	57.0	3.0	50.0%	0.0%	
23	SIOUX FALLS	438	100.0%	100.0%	7.0	6.7	2.7	33.3%	0.0%	
23	ST CLOUD	656	91.7%	66.7%	26.7	52.7	2.4	75.0%	8.3%	38.8
ALL VA			90.2%	67.1%	27.3	13.6	2.4	45.3%	12.9%	21.1
AVERAGE			90.9%	69.5%	25.3	15.3	2.5	47.4%	14.8%	21.8
SD			8.0%	17.1%	12.1	11.1	0.3	22.1%	14.0%	24.2
CV			0.09	0.25	0.48	0.73	0.11	0.47	0.94	1.11

\* Outlined values are 1 SD in the undesirable direction from the mean of all VAMCs and reflect low outpatient service delivery.

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

											Summary						
VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Continuity of Outpatient Care (Avg Z)						
Median: VAMC			9.62	9.74	2.57	4.15	0.09	0.55	0.82	2.43							
VA National Avg.			12.95	10.34	2.59	4.03	0.12	0.57	0.80	2.60							
1	BEDFORD	518	15.36	11.13		0.13	0.34	-0.01	-0.05	X	1.20	1.36					
1	BOSTON HCS	523	-1.66	-1.95	X	0.10	0.01	0.02	0.06		-0.67	0.24					
1	CONNECTICUT HCS	689	1.19	0.83		0.18	0.33	-0.02	-0.02	X	-0.12	0.66					
1	MANCHESTER	608	-2.87	-3.70	X	-0.02	-0.19	0.03	0.10		-0.65	-0.17					
1	NORTHAMPTON	631	-1.80	-2.36	X	0.13	0.01	0.02	0.00		-0.38	0.10					
1	PROVIDENCE	650	1.47	0.43		0.23	0.27	-0.04	X	0.01	-0.22	0.92					
1	TOGUS	402	1.03	0.16		0.08	0.13	0.03	-0.05	X	-0.07	X	-0.28	0.01			
1	WHITE RIVER JCT	405	-0.91	-1.81	X	0.13	0.14	0.04	0.08		-0.44	0.38					
2	ALBANY	500	3.49	2.44		0.13	0.30	0.01	0.06		-0.52	0.82					
2	BATH	514	5.87	2.16		0.17	0.20	-0.04	-0.09	X	-0.04	X	0.41	0.68			
2	CANANDAIGUA	532	11.97	8.91		0.17	0.40	0.01	-0.06	X	-0.02	0.39	1.18				
2	SYRACUSE	670	0.16	-1.30	X	0.25	0.43	-0.04	X	0.01	0.03	-0.26	0.94				
2	WESTERN NEW YORK HCS	528	6.32	3.08		0.18	0.23	-0.02	0.06		0.05	-0.40	1.12				
3	BRONX	526	1.98	-0.98		0.18	0.35	0.02	-0.04	X	-0.02	-0.37	0.45				
3	HUDSON VALLEY HCS	620	7.03	1.36		0.20	0.39	-0.01	-0.11	X	0.00	-0.14	0.79				
3	NEW JERSEY HCS	561	5.98	0.80		0.07	-0.03	0.04	-0.01		0.00	-0.05	0.28				
3	NEW YORK HARBOR HCS	630	-1.14	-2.47	X	0.13	-0.02	0.01	0.14		0.08	-0.86	0.53				
3	NORTHPORT	632	7.15	4.92		0.22	0.10	-0.03	0.16		0.09	-0.59	1.52				
4	ALTOONA	503	-1.30	-2.50	X	0.14	0.16	0.03	0.05		0.03	-0.51	0.36				
4	BUTLER	529	-0.89	-3.06	X	0.07	-0.13	0.01	-0.04	X	-0.05	X	-0.12	-0.22			
4	CLARKSBURG	540	-2.55	-3.89	X	0.00	-0.54	X	-0.03		0.11	0.04	-0.67	-0.08			
4	COATESVILLE	542	7.30	3.56		0.12	0.17	0.03	0.02		0.04	-0.02	0.76				
4	ERIE	562	0.71	-0.34		0.10	0.02	0.00	-0.15	X	-0.12	X	-0.03	-0.25			
4	LEBANON	595	-5.30	X	-5.24	X	0.09	-0.17	-0.02	X	-0.06	X	-0.40	-0.40			
4	PHILADELPHIA	642	-3.83	X	-4.07	X	0.11	-0.08	0.03		0.04		-0.75	-0.08			
4	PITTSBURGH HCS	646	-1.08		-1.70	X	0.09	-0.02	0.00		-0.01		-0.30	0.12			
4	WILKES BARRE	693	-3.38	X	-4.04	X	0.08	-0.23	X	0.02	-0.06	X	-0.07	X	-0.38	-0.47	
4	WILMINGTON	460	-5.74	X	-5.96	X	0.03	-0.44	X	0.02	0.01	-0.03	-0.77	-0.62			
5	MARTINSBURG	613	-4.99	X	-4.47	X	0.01	-0.37	X	0.04	0.11	0.04	-0.83	-0.30			
5	MARYLAND HCS	512	5.36		2.64		0.12	0.15	0.04		0.06	0.04	-0.20	0.70			
5	WASHINGTON DC	688	-0.25		-2.22	X	-0.05	X	-0.45	X	0.08	-0.09	X	-0.10	X	0.09	-0.99
6	ASHEVILLE	637	-2.85		-3.29	X	0.09		-0.06		0.01	-0.03	X	-0.61	0.01		
6	BECKLEY	517	-2.43		-3.40	X	0.02		-0.31	X	0.00	0.07	0.02		-0.68	-0.08	
6	DURHAM	558	-3.87	X	-3.59	X	0.05		-0.21		0.04	0.03	-0.02	X	-0.74	-0.35	
6	FAYETTEVILLE NC	565	-1.41		-2.25	X	0.07		-0.21		0.00	-0.01	-0.03	X	-0.36	-0.12	
6	HAMPTON	590	-2.58	X	-3.10	X	0.00		-0.46	X	0.05	0.09	0.01		-0.99	-0.35	
6	RICHMOND	652			-1.10		0.06		-0.05		0.02	0.08	0.03		-0.47	0.25	
6	SALEM	658	1.94		0.13		0.06		-0.14		-0.01	0.00	-0.02		-0.32	0.19	
6	SALISBURY	659	-2.59	X	-3.21	X	0.04		-0.34	X	0.03	-0.03	X	-0.05	X	-0.42	-0.51

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

													Summary					
					Number of		Continuity:		Continuity:		Dropout				Continuity of			
VISN	Station	Code	Number of		Days with		Bi-months		Months with		(6 months		Continuity of		Modified			
			O/P Stops		O/P Stops		with 2 stops		any stops		with no		Care Index		MCI			
											O/P visit)				Number of			
															Providers			
															Outpatient Care			
															(Avg Z)			
Median: VAMC			9.62		9.74		2.57		4.15		0.09		0.55		0.82		2.43	
VA National Avg.			12.95		10.34		2.59		4.03		0.12		0.57		0.80		2.60	
7	ATLANTA	508	-3.38	X	-3.79	X	0.01	-0.27	X	0.05	-0.06	X	-0.07	X	-0.20	-0.72		
7	AUGUSTA	509	0.26		-0.76		0.02	-0.14		0.04	-0.01		-0.01		-0.35	-0.14		
7	BIRMINGHAM	521	-3.94	X	-4.37	X	-0.07	X	-0.43	X	0.03	-0.18	X	-0.17	X	-0.06	-1.32	
7	CENTRAL ALABAMA VETERANS HCS	619	3.28		-0.83		-0.02	-0.29	X	0.07	-0.10	X	-0.10	X	0.16	-0.67		
7	CHARLESTON	534	-0.62		-2.39	X	0.11	-0.02		0.03	-0.15	X	-0.10	X		-0.42		
7	COLUMBIA SC	544	-1.48		-2.17	X	0.14	0.12		0.02	-0.09	X	-0.09	X	-0.02	-0.12		
7	DUBLIN	557	-1.94		-3.13	X	-0.15	X	-0.61	X	0.07	0.16	0.06		-0.81	-0.56		
7	TUSCALOOSA	679	5.82		4.24		0.08	0.10		0.03	-0.16	X	-0.09	X	1.16	0.08		
8	BAY PINES	516	1.83		-3.01	X	0.00	-0.34	X	0.02	-0.10	X	-0.12	X	0.12	-0.67		
8	MIAMI	546	-2.02		-2.43	X	0.03	-0.13		0.07	-0.03	X	-0.04	X	-0.41	-0.47		
8	NO. FL/SO. GA VETERANS HS	573	0.46		-1.89	X	0.01	-0.28	X	0.04	0.05		0.01		-0.55	-0.16		
8	SAN JUAN PR	672	-3.47	X	-4.35	X		-0.49	X	0.02	0.07		0.02		-0.39	-0.36		
8	TAMPA	673	-1.56		-2.88	X	0.00	-0.38	X	0.04	0.04		-0.01		-0.51	-0.38		
8	W PALM BEACH	548	-1.38		-2.60	X	0.06	-0.13		0.07	-0.04	X	-0.08	X	-0.24	-0.51		
9	HUNTINGTON	581	-1.71		-2.91	X	0.05	-0.11		0.01	-0.21	X	-0.20	X	0.20	-0.87		
9	LEXINGTON	596	-1.54		-2.45	X	0.04	-0.21		0.00	0.06		0.01		-0.64	0.03		
9	LOUISVILLE	603	-3.17	X	-4.19	X	0.03	-0.18		0.01	-0.14	X	-0.15	X	-0.12	-0.82		
9	MEMPHIS	614	-1.03		-1.89	X	0.09	-0.13		0.02	0.07		0.02		-0.58	0.14		
9	MIDDLE TENN HCS	626	-1.41		-2.34	X	0.04	-0.20		0.04	-0.06	X	-0.09	X	-0.32	-0.51		
9	MOUNTAIN HOME	621	0.59		-0.67		0.04	0.20		0.04	-0.05	X	-0.06	X	-0.36	-0.07		
10	CHILLICOTHE	538	11.41		4.49		0.16	0.35		-0.01	-0.06	X	-0.01		0.27	1.00		
10	CINCINNATI	539	2.43		-0.20		0.13	0.16		0.05	0.01		0.01		-0.05	0.36		
10	CLEVELAND	541	2.37		0.01		0.13	0.18		0.01	-0.08	X	-0.06	X	0.20	0.18		
10	COLUMBUS	757	1.38		-1.33		-0.01	-0.25	X	0.02	0.02		-0.01		-0.21	-0.14		
10	DAYTON	552	4.45		1.75		0.05	-0.11		0.01	-0.06	X	-0.05	X	0.11	0.07		
11	ALLEN PARK	553	-1.69		-2.94	X	-0.01	-0.24	X	0.05	0.02		-0.02	X	-0.27	-0.41		
11	ANN ARBOR HCS	506	2.18		-0.08		0.13	0.06		0.00	0.01		0.01		-0.19	0.45		
11	BATTLE CREEK	515	0.36		-1.15		0.08	-0.14		0.01	-0.08	X	-0.08	X	-0.01	-0.20		
11	ILLIANA HCS	550	2.12		-0.07		0.03	-0.33	X	0.04	-0.04	X	-0.06	X	-0.30	-0.32		
11	INDIANAPOLIS	583	7.64		2.33		0.15	0.22		0.00	-0.03	X	0.00		0.35	0.74		
11	NORTHERN INDIANA HCS	610	12.49		8.63		0.07	0.12		0.05	0.00		0.00		0.30	0.82		
11	SAGINAW	655	-2.31		-3.32	X	0.02	-0.49	X	0.03	0.12		0.05		-0.73	-0.16		
12	CHICAGO HCS	537	9.09		2.82		0.09	0.16		0.03	0.01		0.03		-0.16	0.70		
12	HINES	578	7.14		1.47		0.08	-0.03		0.03	0.00		0.01		-0.05	0.41		
12	IRON MOUNTAIN	585	-2.82		-3.96	X	-0.08	X	-0.60	X	0.02	-0.01	-0.04	X	-0.45	-0.81		
12	MADISON	607	8.22		4.02		0.12	0.19		0.01	-0.08	X	-0.05	X	0.02	0.55		
12	MILWAUKEE	695	5.27		3.20		0.06	-0.03		-0.02	0.03		0.01		-0.32	0.59		
12	NORTH CHICAGO	556	22.80		8.42		0.08	0.07		0.03	-0.05	X	-0.02		0.31	1.04		
12	TOMAH	676	17.84		9.25		0.12	0.31		0.00	-0.07	X	-0.03	X	0.34	1.20		

Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

											Summary				
VISN	Station	Code	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers	Continuity of Outpatient Care (Avg Z)				
Median: VAMC			9.62	9.74	2.57	4.15	0.09	0.55	0.82	2.43					
VA National Avg.			12.95	10.34	2.59	4.03	0.12	0.57	0.80	2.60					
15	COLUMBIA MO	543	2.01	-1.33	0.12	0.02	-0.01	-0.19	X	-0.15	X	0.59	-0.29		
15	EASTERN KANSAS HCS	677	18.27	10.66	0.12	0.16	0.01	-0.07	X	-0.03	X	0.31	1.14		
15	HEARTLAND-EAST HCS	657	-0.93	-2.88	X	0.00	-0.33	X	0.04	0.01	-0.03	X	-0.39	-0.40	
15	HEARTLAND-WEST	589	-1.20	-2.73	X	0.09	-0.06	0.01	0.08	0.04		-0.47	0.26		
15	MARION IL	609	-1.59	-2.94	X	0.17	0.05	-0.03	-0.25	X	-0.23	X	0.17	-0.57	
15	POPLAR BLUFF	647	-4.27	X	-4.64	X	-0.04	-0.51	X	0.00	-0.04	X	-0.58	-0.67	
15	WICHITA	452	3.34	1.15	0.13	0.07	0.02	-0.04	X	-0.03	X	-0.04	0.33		
16	ALEXANDRIA	502	-2.34	-3.61	X	0.02	-0.13	-0.04	-0.10	X	-0.09	X	-0.16	-0.38	
16	CENTRAL ARKANSAS HCS	598	4.13	1.80	0.11	0.08	0.02	-0.09	X	-0.06	X	0.20	0.18		
16	FAYETTEVILLE AR	564	-1.94	-3.12	X	-0.07	X	-0.36	X	0.03	-0.17	X	-0.19	-1.08	
16	GULF COAST HCS	520	0.32	-0.72	0.13	0.04	0.05	-0.09	X	-0.08	X	-0.12	-0.16		
16	HOUSTON	580	0.10	-1.33	X	0.06	-0.07	0.02	-0.12	X	-0.12	X	0.32	-0.42	
16	JACKSON	586	-6.01	X	-5.56	X	0.10	-0.22	-0.01	0.01	-0.06	X	-0.61	-0.34	
16	MUSKOGEE	623	-2.85	X	-3.38	X	0.11	-0.09	0.00	-0.12	X	-0.11	X	-0.22	-0.42
16	NEW ORLEANS	629	-5.25	X	-3.30	X	0.07	-0.06	0.06		-0.02	X	-0.59	-0.34	
16	OKLAHOMA CITY	635	4.58	0.12	-0.11	X	-0.33	X	0.11	-0.03	X	-0.06	X	0.01	-0.72
16	SHREVEPORT	667	-0.06	-1.76	X	0.00	-0.22	0.06	0.01	-0.03	X	-0.39	-0.38		
17	CENTRAL TEXAS VETERANS HCS	674	0.28	-0.38	0.02	-0.15	0.05	-0.02	-0.04	X	-0.33	-0.25			
17	NORTH TEXAS HCS	549	-0.69	-1.23	X	-0.01	-0.30	X	0.04	-0.02	X	-0.30	-0.45		
17	SOUTH TEXAS VETERANS HCS	671	-2.31	X	-2.58	X	0.00	-0.25	X	0.03	0.05	-0.01	-0.64	-0.27	
18	AMARILLO HCS	504	-0.78	-2.47	X	-0.07	X	-0.45	X	0.08	-0.10	X	-0.24	-1.07	
18	EL PASO HCS	756	-1.59	-2.00	X	0.05	-0.06	0.05	0.01	-0.02		-0.56	-0.17		
18	NEW MEXICO HCS	501	4.18	0.44	0.07	0.04	0.02	-0.10	X	-0.07	X	0.52	-0.02		
18	NORTHERN ARIZONA VA HCS	649	-0.53	-1.60	0.03	-0.13	0.06	0.07	0.04		-0.39	0.01			
18	PHOENIX	644	-3.21	X	-4.28	X	-0.04	-0.36	X	0.07	-0.20	X	0.36	-1.44	
18	SOUTHERN ARIZONA	678	-2.22	-2.41	X	0.12	0.05	0.00	-0.11	X	-0.09	X	0.30	-0.19	
18	WEST TEXAS HCS	519	0.02	-2.40	X	0.00	-0.50	X	0.04	0.05	0.00	-0.50	-0.34		
19	CHEYENNE	442	-1.44	-2.14	X	0.03	-0.10	0.04	-0.07	X	-0.07	X	-0.23	-0.44	
19	DENVER	554	3.49	1.05	0.17	0.34	0.03	-0.02	0.01		-0.13	0.62			
19	GRAND JUNCTION	575	0.98	0.86	-0.02	-0.14	-0.04	-0.20	X	-0.17	X	0.62	-0.51		
19	MONTANA HCS	436	-5.11	X	-5.00	X	-0.17	X	0.14	-0.04	-0.08	X	-0.63	-1.72	
19	SALT LAKE CITY HCS	660	1.25		0.15	0.28	0.02	-0.04	X	-0.01		-0.05	0.39		
19	SHERIDAN	666	-0.58	-0.16	0.09		-0.01	-0.01	-0.04	X	-0.30	0.16			
20	ALASKA HCS & RO	463	0.74	-0.06	0.12	0.14	0.09	0.12	0.06		-0.62	0.44			
20	BOISE	531	-2.21	-1.87	X	0.13	0.21	0.00	0.08	0.05	-0.79	0.53			
20	PORTLAND	648	1.72	0.80	0.17	0.28	0.01	0.06	0.04		-0.31	0.81			
20	PUGET SOUND HCS	663	0.26	-0.51	0.16	0.19	0.00	-0.01	0.00		-0.17	0.46			
20	ROSEBURG HCS	653	-1.99	-2.60	X	0.05	-0.24	X	0.01	0.04	-0.01	-0.58	-0.11		
20	SPOKANE	668	5.08	2.36	0.21	0.39	-0.01	0.08	0.04		-0.58	1.20			
20	WALLA WALLA	687	-0.99	-2.54	-0.09	-0.56	X	0.14	0.02	-0.04	-0.36	-1.07			
20	WHITE CITY	692	1.03	1.29	0.14	0.11	-0.01	0.08	0.04		-0.45	0.74			



Table 17A. Deviation of continuity of care from that of the median Station over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station, (adjusted for patient characteristics, distance of residence from VA, diagnosis, etc.).

											Summary			
				Number of	Number of	Continuity:	Continuity:	Dropout					Continuity of	
VISN	Station	Code	Number of	O/P Stops	O/P Stops	Bi-months	Months with	(6 months	Continuity of	Modified	Number of	Outpatient Care		
			O/P Stops	O/P Stops	with 2 stops	any stops	with no	Care Index	MCI	Providers	(Avg Z)			
Median: VAMC			9.62	9.74	2.57	4.15	0.09	0.55	0.82	2.43				
VA National Avg.			12.95	10.34	2.59	4.03	0.12	0.57	0.80	2.60				
21	CENTRAL CALIFORNIA HCS	570	-2.57	-2.72	X	0.09	-0.13	0.02	-0.05	X	-0.08	X	-0.51	-0.31
21	HONOLULU	459	1.87	0.53		0.14	0.26	0.01	0.03		0.01		-0.24	0.60
21	MANILA	358	-6.70	-7.21		-0.19	-0.91	X	0.34		0.37		-1.47	-1.42
21	NORTHERN CALIFORNIA HCS	612	-1.60	-2.64	X	0.06	-0.03	0.05	-0.03	X	-0.04	X	-0.41	-0.27
21	PALO ALTO HCS	640	-1.09	-1.73	X	0.13	0.10	0.01	-0.03	X	-0.03	X	-0.11	0.12
21	SAN FRANCISCO	662	1.35	-0.42		0.08	-0.01	0.03	0.00		-0.02	X	-0.14	0.10
21	SIERRA NEVADA HCS	654	-2.32	-1.57		0.15	0.04	0.00	0.01		-0.02		-0.59	0.24
22	GREATER LOS ANGELES HCS	691	4.79	2.00		0.13	0.12	0.04	0.00		-0.02	X	0.10	0.42
22	LOMA LINDA	605	0.21	-1.99	X	0.07	-0.23	X	0.02	-0.06	X	-0.06	X	0.03
22	LONG BEACH HCS	600	3.77	-1.82	X	0.02	-0.20	0.05	-0.09	X	-0.07	X	0.08	-0.43
22	SAN DIEGO HCS	664	-1.89	-2.57	X	0.10	-0.13	0.02	-0.06	X	-0.09	X	-0.03	-0.30
22	SOUTHERN NEVADA HCS	593	0.17	-1.61	X	-0.03	-0.39	X	0.05	0.00	-0.05	X	-0.23	-0.51
23	BLACK HILLS HCS	568	8.74	3.05		0.10	-0.06	0.02	0.07		0.03		0.28	0.74
23	CENTRAL IOWA HCS	555	21.54	11.29		0.11	0.23	0.00	-0.14	X	-0.04	X	1.29	1.16
23	FARGO	437	0.68	-1.80		-0.04	-0.22	0.01	-0.11	X	-0.13	X	-0.17	-0.66
23	IOWA CITY	584	0.25	-1.28		0.11	0.01	-0.02	-0.24	X	-0.22	X	0.43	-0.54
23	MINNEAPOLIS	618	6.26	-1.06		0.09	0.02	-0.01	-0.11	X	-0.07	X	0.66	0.13
23	NEBRASKA- WESTERN IOWA HCS	636	6.10	1.12		0.15	0.16	-0.02	0.09		0.07		-0.36	1.04
23	SIOUX FALLS	438	2.60	-0.25		0.14	0.00	-0.02	0.07		0.04		-0.33	0.68
23	ST CLOUD	656	5.90	-0.68		0.03	-0.26	X	-0.16	X	-0.11	X	0.97	-0.36

X = Significantly different (p<.05) from median VISN in the undesired direction, after adjustment for differences in patient characteristics, distance of residence from VA, diagnosis, etc.

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
1	518	BEDFORD	478	22.98	17.75	2.72	4.65	0.10	0.53	0.82	3.87
1	523	BOSTON HCS	2027	13.65	11.44	2.63	4.26	0.11	0.67	0.87	2.21
1	689	CONNECTICUT HCS	1186	16.59	13.34	2.69	4.52	0.11	0.57	0.82	2.94
1	608	MANCHESTER	380	7.81	7.23	2.55	4.02	0.09	0.68	0.85	1.88
1	631	NORTHAMPTON	623	10.44	9.10	2.55	3.99	0.12	0.58	0.80	2.38
1	650	PROVIDENCE	867	10.75	9.79	2.64	4.20	0.11	0.59	0.79	2.43
1	402	TOGUS	867	9.30	7.65	2.48	3.59	0.15	0.60	0.78	2.28
1	405	WHITE RIVER JCT	565	9.76	8.80	2.61	4.15	0.12	0.70	0.87	2.11
2	500	ALBANY	994	13.43	11.40	2.61	4.38	0.13	0.63	0.86	2.34
2	514	BATH	449	18.55	13.31	2.67	4.27	0.10	0.51	0.79	3.28
2	532	CANANDAIGUA	467	21.93	16.80	2.70	4.53	0.12	0.53	0.82	3.34
2	670	SYRACUSE	728	11.31	9.32	2.69	4.28	0.07	0.62	0.85	2.31
2	528	WESTERN NEW YORK HCS	918	14.15	11.38	2.70	4.36	0.09	0.61	0.86	2.52
3	526	BRONX	593	24.79	18.46	2.75	4.72	0.08	0.53	0.84	3.24
3	620	HUDSON VALLEY HCS	771	30.28	19.12	2.73	4.64	0.09	0.54	0.86	3.04
3	561	NEW JERSEY HCS	1486	13.78	11.42	2.61	4.15	0.11	0.64	0.83	2.48
3	630	NEW YORK HARBOR HCS	1815	15.66	12.84	2.67	4.37	0.11	0.67	0.87	2.23
3	632	NORTHPORT	794	16.02	13.44	2.66	4.20	0.09	0.74	0.89	2.15
4	503	ALTOONA	210	10.54	8.82	2.70	4.33	0.07	0.52	0.80	2.37
4	529	BUTLER	98	8.06	6.72	2.54	3.84	0.12	0.53	0.76	2.34
4	540	CLARKSBURG	763	5.62	5.15	2.42	3.23	0.10	0.71	0.85	1.81
4	542	COATESVILLE	768	11.94	10.26	2.65	4.34	0.11	0.65	0.85	2.28
4	562	ERIE	221	11.08	9.55	2.58	4.14	0.07	0.47	0.72	2.71
4	595	LEBANON	467	9.19	7.88	2.67	3.97	0.07	0.53	0.75	2.51
4	642	PHILADELPHIA	1447	14.34	11.42	2.65	4.24	0.12	0.60	0.82	2.53
4	646	PITTSBURGH HCS	786	9.86	8.20	2.62	4.00	0.07	0.62	0.83	2.11
4	693	WILKES BARRE	694	8.79	7.46	2.54	3.89	0.12	0.55	0.76	2.22
4	460	WILMINGTON	244	5.20	4.68	2.49	3.30	0.15	0.59	0.76	1.91
5	613	MARTINSBURG	629	10.31	8.32	2.47	3.53	0.18	0.70	0.87	2.26
5	512	MARYLAND HCS	811	23.37	16.95	2.61	4.34	0.17	0.55	0.83	3.40
5	688	WASHINGTON DC	1025	19.66	14.46	2.57	4.20	0.19	0.44	0.74	3.77
6	637	ASHEVILLE	848	6.56	6.12	2.56	3.67	0.06	0.61	0.79	1.97
6	517	BECKLEY	508	4.48	4.23	2.39	3.15	0.06	0.66	0.81	1.77
6	558	DURHAM	1055	7.95	7.19	2.44	3.58	0.14	0.64	0.80	2.05
6	565	FAYETTEVILLE NC	859	9.43	8.33	2.56	3.90	0.11	0.53	0.76	2.61
6	590	HAMPTON	809	11.95	10.25	2.53	3.87	0.18	0.54	0.78	2.55
6	652	RICHMOND	491	9.62	8.35	2.52	3.76	0.10	0.72	0.86	1.95
6	658	SALEM	483	8.60	7.52	2.58	3.68	0.07	0.65	0.81	2.08
6	659	SALISBURY	1053	6.83	6.33	2.40	3.38	0.13	0.59	0.74	2.05

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
7	508	ATLANTA	1411	15.00	11.37	2.63	4.23	0.11	0.50	0.77	3.23
7	509	AUGUSTA	951	14.62	10.63	2.55	3.83	0.10	0.41	0.70	3.30
7	521	BIRMINGHAM	1180	9.65	8.34	2.49	3.85	0.14	0.49	0.69	2.65
7	619	CENTRAL ALABAMA VETERANS HCS	1093	13.99	10.10	2.45	3.68	0.18	0.48	0.71	2.97
7	534	CHARLESTON	864	8.29	6.81	2.60	3.89	0.14	0.49	0.73	2.43
7	544	COLUMBIA SC	1955	10.49	9.17	2.61	4.09	0.10	0.46	0.70	2.84
7	557	DUBLIN	754	20.32	9.30	2.43	3.41	0.14	0.62	0.84	2.66
7	679	TUSCALOOSA	756	14.29	11.40	2.55	3.79	0.10	0.42	0.68	4.16
8	516	BAY PINES	1522	10.89	8.21	2.53	3.75	0.12	0.57	0.77	2.62
8	546	MIAMI	850	11.77	10.19	2.62	4.16	0.11	0.60	0.81	2.45
8	573	NO. FL/SO. GA VETERANS HS	1679	8.85	7.55	2.53	3.72	0.13	0.62	0.80	2.08
8	672	SAN JUAN PR	461	6.67	6.05	2.57	3.59	0.09	0.69	0.85	2.05
8	673	TAMPA	2301	8.27	7.38	2.54	3.71	0.15	0.61	0.79	2.11
8	548	W PALM BEACH	774	10.13	8.45	2.60	3.94	0.13	0.56	0.76	2.40
9	581	HUNTINGTON	899	5.49	4.98	2.44	3.42	0.12	0.45	0.62	2.33
9	596	LEXINGTON	523	12.25	8.15	2.65	4.06	0.10	0.74	0.88	1.85
9	603	LOUISVILLE	473	6.85	5.97	2.50	3.62	0.11	0.47	0.69	2.41
9	614	MEMPHIS	517	9.38	8.05	2.47	3.70	0.15	0.61	0.82	2.27
9	626	MIDDLE TENN HCS	1165	6.16	5.45	2.51	3.59	0.10	0.57	0.74	2.10
9	621	MOUNTAIN HOME	584	8.33	7.21	2.41	3.82	0.13	0.47	0.67	2.37
10	538	CHILLICOTHE	617	13.20	8.67	2.48	3.53	0.12	0.60	0.81	2.32
10	539	CINCINNATI	787	20.19	15.25	2.66	4.53	0.16	0.54	0.83	3.30
10	541	CLEVELAND	1736	16.69	12.22	2.60	4.27	0.12	0.48	0.75	3.34
10	757	COLUMBUS	488	10.17	7.97	2.51	3.77	0.14	0.56	0.76	2.42
10	552	DAYTON	569	20.89	14.15	2.58	4.18	0.14	0.56	0.81	3.05
11	553	ALLEN PARK	282	11.29	9.52	2.57	3.67	0.13	0.61	0.78	2.48
11	506	ANN ARBOR HCS	356	13.67	10.34	2.65	4.24	0.12	0.55	0.80	2.68
11	515	BATTLE CREEK	805	12.23	9.48	2.48	3.77	0.18	0.43	0.69	3.37
11	550	ILLIANA HCS	417	8.12	6.81	2.51	3.68	0.15	0.60	0.79	2.04
11	583	INDIANAPOLIS	480	18.10	14.48	2.65	4.44	0.10	0.52	0.79	3.32
11	610	NORTHERN INDIANA HCS	393	11.09	9.04	2.58	3.96	0.13	0.55	0.76	2.58
11	655	SAGINAW	238	8.81	8.18	2.63	4.08	0.11	0.59	0.81	2.35
12	537	CHICAGO HCS	916	27.90	19.28	2.75	4.78	0.09	0.53	0.85	3.54
12	578	HINES	496	16.63	12.30	2.60	4.18	0.12	0.60	0.82	2.74
12	585	IRON MOUNTAIN	179	8.60	7.11	2.58	4.00	0.08	0.59	0.78	2.34
12	607	MADISON	360	10.30	8.38	2.53	3.86	0.14	0.54	0.76	2.49
12	695	MILWAUKEE	690	16.20	12.74	2.63	4.20	0.10	0.62	0.83	2.58
12	556	NORTH CHICAGO	422	20.46	14.58	2.67	4.34	0.10	0.59	0.82	3.01
12	676	TOMAH	488	16.74	10.56	2.56	3.93	0.11	0.50	0.75	2.94

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
15	543	COLUMBIA MO	446	11.25	7.79	2.60	3.97	0.09	0.44	0.68	3.13
15	677	EASTERN KANSAS HCS	912	23.62	16.98	2.67	4.35	0.10	0.55	0.81	3.06
15	657	HEARTLAND-EAST HCS	584	12.77	10.45	2.58	4.09	0.13	0.67	0.83	2.21
15	589	HEARTLAND-WEST	771	11.58	9.47	2.62	4.19	0.15	0.61	0.83	2.27
15	609	MARION IL	751	7.06	6.12	2.65	3.96	0.07	0.38	0.61	2.71
15	647	POPLAR BLUFF	525	6.56	5.68	2.61	3.82	0.09	0.50	0.74	2.23
15	452	WICHITA	398	11.82	10.21	2.57	4.00	0.12	0.55	0.79	2.60
16	502	ALEXANDRIA	373	8.68	7.33	2.57	3.94	0.10	0.56	0.76	2.45
16	598	CENTRAL ARKANSAS HCS	1104	12.96	10.02	2.50	3.67	0.13	0.44	0.67	2.93
16	564	FAYETTEVILLE AR	731	6.95	5.72	2.44	3.45	0.12	0.48	0.71	2.34
16	520	GULF COAST HCS	1832	8.74	7.45	2.58	3.78	0.12	0.54	0.76	2.30
16	580	HOUSTON	1516	13.03	11.07	2.53	3.80	0.12	0.55	0.76	2.69
16	586	JACKSON	484	7.96	6.85	2.69	3.98	0.08	0.59	0.78	2.49
16	623	MUSKOGEE	1021	8.57	7.62	2.59	3.95	0.13	0.45	0.70	2.57
16	629	NEW ORLEANS	1758	13.62	11.35	2.64	4.28	0.13	0.57	0.81	2.52
16	635	OKLAHOMA CITY	598	27.40	15.66	2.54	4.07	0.15	0.55	0.82	3.44
16	667	SHREVEPORT	377	12.61	10.31	2.49	3.92	0.16	0.60	0.79	2.42
17	674	CENTRAL TEXAS VETERANS HCS	1279	10.91	10.06	2.61	4.27	0.13	0.64	0.83	2.22
17	549	NORTH TEXAS HCS	1745	12.91	10.71	2.57	4.07	0.14	0.58	0.79	2.63
17	671	SOUTH TEXAS VETERANS HCS	1856	8.02	7.37	2.45	3.57	0.14	0.58	0.77	2.09
18	504	AMARILLO HCS	351	6.45	5.53	2.31	3.08	0.18	0.51	0.69	2.15
18	756	EL PASO HCS	483	10.12	9.52	2.65	4.21	0.10	0.68	0.86	1.93
18	501	NEW MEXICO HCS	1698	9.99	8.43	2.51	3.73	0.16	0.59	0.80	2.53
18	649	NORTHERN ARIZONA VA HCS	470	12.23	10.11	2.61	4.12	0.17	0.69	0.86	2.39
18	644	PHOENIX	1779	9.24	7.74	2.54	3.84	0.17	0.44	0.69	2.84
18	678	SOUTHERN ARIZONA	741	10.15	8.98	2.68	4.24	0.09	0.43	0.70	3.43
18	519	WEST TEXAS HCS	207	7.89	5.78	2.39	3.24	0.17	0.69	0.82	1.84
19	442	CHEYENNE	308	11.68	9.55	2.69	4.27	0.10	0.49	0.74	2.66
19	554	DENVER	1972	14.32	11.73	2.67	4.44	0.13	0.58	0.84	2.59
19	575	GRAND JUNCTION	235	9.31	8.25	2.55	3.95	0.09	0.35	0.60	3.13
19	436	MONTANA HCS	202	10.19	7.57	2.36	3.38	0.27	0.49	0.72	2.57
19	660	SALT LAKE CITY HCS	1012	10.99	9.74	2.63	4.17	0.11	0.57	0.82	2.50
19	666	SHERIDAN	159	15.58	12.64	2.61	4.15	0.18	0.54	0.81	2.95
20	463	ALASKA HCS & RO	284	7.46	6.65	2.46	3.60	0.22	0.69	0.83	1.88
20	531	BOISE	425	10.52	9.19	2.65	4.29	0.12	0.74	0.89	1.89
20	648	PORTLAND	1667	11.00	9.62	2.64	4.21	0.11	0.69	0.87	2.10
20	663	PUGET SOUND HCS	2998	13.15	10.93	2.64	4.27	0.13	0.58	0.82	2.80
20	653	ROSEBURG HCS	948	10.56	9.37	2.57	3.99	0.13	0.63	0.81	2.15
20	668	SPOKANE	533	9.05	7.91	2.50	3.76	0.15	0.67	0.85	2.04
20	687	WALLA WALLA	225	11.19	8.47	2.43	3.60	0.17	0.67	0.82	2.22
20	692	WHITE CITY	317	10.85	9.46	2.65	4.12	0.15	0.69	0.87	2.33

Table 17B. Outpatient continuity of care over the first six months of treatment in FY 2004, among patients with PTSD (ICD-9 code 309.81), by Station.

VISN	CODE	STATION	N	Number of O/P Stops	Number of Days with O/P Stops	Continuity: Bi-months with 2 stops	Continuity: Months with any stops	Dropout (6 months with no O/P visit)	Continuity of Care Index	Modified MCI	Number of Providers
21	570	CENTRAL CALIFORNIA HCS	478	11.12	9.31	2.50	3.62	0.14	0.65	0.81	2.16
21	459	HONOLULU	776	10.60	9.18	2.63	4.03	0.14	0.76	0.89	1.87
21	358	MANILA	8	2.50	2.50	2.38	2.38	0.50	0.92	0.94	1.13
21	612	NORTHERN CALIFORNIA HCS	1386	10.43	8.74	2.52	3.84	0.16	0.61	0.80	2.28
21	640	PALO ALTO HCS	1668	12.15	10.77	2.60	4.17	0.14	0.58	0.82	2.61
21	662	SAN FRANCISCO	992	16.57	13.23	2.60	4.19	0.14	0.63	0.84	2.51
21	654	SIERRA NEVADA HCS	351	10.77	9.34	2.66	4.21	0.13	0.54	0.78	2.65
22	691	GREATER LOS ANGELES HCS	2121	16.98	13.62	2.62	4.12	0.12	0.63	0.84	2.66
22	605	LOMA LINDA	1076	11.69	9.78	2.62	3.94	0.11	0.61	0.81	2.51
22	600	LONG BEACH HCS	490	15.41	12.88	2.50	3.95	0.14	0.56	0.78	2.95
22	664	SAN DIEGO HCS	1040	11.15	9.92	2.54	3.99	0.14	0.63	0.83	2.53
22	593	SOUTHERN NEVADA HCS	888	11.20	9.82	2.58	4.00	0.14	0.56	0.78	2.64
23	568	BLACK HILLS HCS	448	28.31	17.00	2.65	4.29	0.12	0.53	0.83	3.81
23	555	CENTRAL IOWA HCS	350	27.35	15.52	2.52	3.90	0.11	0.49	0.76	3.73
23	437	FARGO	124	9.23	6.37	2.35	3.24	0.24	0.53	0.71	2.57
23	584	IOWA CITY	369	11.11	8.80	2.58	4.01	0.12	0.46	0.70	2.99
23	618	MINNEAPOLIS	1015	15.37	9.90	2.60	4.00	0.09	0.51	0.77	3.01
23	636	NEBRASKA- WESTERN IOWA HCS	669	14.58	10.54	2.62	4.16	0.13	0.62	0.86	2.33
23	438	SIOUX FALLS	235	9.70	7.46	2.63	3.86	0.07	0.69	0.86	2.03
23	656	ST CLOUD	814	24.32	14.26	2.64	4.25	0.09	0.33	0.69	4.77
All VA			113,081	12.95	10.34	2.59	4.03	0.12	0.57	0.80	2.60
AVG			814	12.42	9.79	2.57	3.96	0.13	0.57	0.79	2.56
SD			530	5.21	3.16	0.09	0.36	0.05	0.09	0.06	0.53
CV			0.65	0.42	0.32	0.03	0.09	0.37	0.15	0.08	0.21

Table 18. Overall PTSD Performance Score for FY 2004, by VISN. †

<i>VISN</i>	<i>Inpatient Summary Score Average Z: Weighted# (Table 14)</i>	<i>Outpatient Summary Score Average Z: Weighted (Table 16)</i>	<i>Summary Continuity of Outpatient Care Average Z (Table 16A)</i>	<i>Total PTSD Summary Score Average Z: (+=desired)</i>	<i>Rank Order On Total PTSD Summary Score</i>
1	0.01	-0.43	0.80	0.13	8
2	-0.10	0.97	1.57	0.81	1
3	-0.09	0.59	1.06	0.52	4
4	0.10	-0.38	-0.21	-0.16	12
5	-0.74	0.49	-0.19	-0.15	11
6	-0.35	-0.71	-0.33	-0.46	19
7	0.45	-0.22	-1.03	-0.26	13
8	0.60	-0.17	-0.81	-0.13	10
9	-0.36	-0.31	-0.79	-0.49	20
10	0.31	1.66	0.28	0.75	2
11	-0.81	-0.89	0.13	-0.52	21
12	-0.60	-0.12	0.93	0.07	9
15	-0.85	-0.10	0.06	-0.30	15
16	0.04	-0.51	-0.73	-0.40	18
17	0.40	-0.59	-0.70	-0.30	16
18	0.36	0.13	-1.31	-0.27	14
19	0.79	0.75	0.30	0.61	3
20	0.87	-0.45	0.83	0.42	5
21	0.56	-0.03	-0.11	0.14	7
22	0.10	-0.98	-0.22	-0.36	17
23	-0.70	1.29	0.38	0.33	6
AVG	0.0	0.0	0.0	0.00	
SD	0.5	0.7	0.8	0.42	

# Sign is reversed so that high scores reflect difference in the desired direction -- low inpatient utilization.

† Rankings only comparable beginning with FY 1998 report.

Table 19. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2003 to March 31, 2004, by PTSD diagnosis and program type, by VISN†.

VISN	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
	<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	268	97.8%	1,399	97.9%	370	98.1%
2	41	90.2%	743	96.4%		
3	75	97.3%	1,209	94.4%		
4	118	84.7%	1,356	94.4%	75	98.7%
5	67	89.6%	1,350	91.6%	50	96.0%
6	371	79.2%	1,966	96.1%	96	96.9%
7	222	97.7%	1,675	96.4%	99	94.9%
8	110	99.1%	2,115	96.8%		
9	129	91.5%	1,821	90.6%	50	94.0%
10	54	90.7%	1,298	93.3%	123	96.7%
11	56	91.1%	1,344	96.1%	177	98.9%
12	68	97.1%	1,542	92.2%	132	100.0%
15	151	72.2%	1,710	95.7%		
16	157	94.9%	2,886	94.7%	29	93.1%
17	106	93.4%	1,449	95.4%		
18	114	95.6%	1,063	95.3%	103	93.2%
19	122	91.0%	797	94.9%		
20	295	87.1%	1,180	96.4%	155	96.8%
21	59	96.6%	1,040	96.0%	289	96.5%
22	67	94.0%	1,451	94.3%	121	96.7%
23	40	95.0%	1,164	96.3%		
All VA	2,690	90.3%	30,558	95.0%	1,869	97.1%
Average	128	91.7%	1,455	95.0%	134	96.5%
S.D.	90	6.6%	477	1.8%	94	2.1%
C.V.	0.70	0.07	0.33	0.02	0.70	0.02

† Does not include PRRP and domiciliary care.

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2003 to March 31, 2004, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
1	518	BEDFORD	3	100.0%	344	98.0%	354	98.0%
1	523	BOSTON HCS	27	100.0%	402	97.8%		
1	689	CONNECTICUT HCS	14	100.0%	172	97.7%		
1	631	NORTHAMPTON	181	96.7%	162	99.4%		
1	650	PROVIDENCE	18	100.0%	194	99.0%		
1	402	TOGUS	4	100.0%	11	100.0%	16	100.0%
1	405	WHITE RIVER JCT	21	100.0%	114	94.7%		
2	500	ALBANY	7	100.0%	146	95.9%		
2	532	CANANDAIGUA	5	80.0%	156	97.4%		
2	670	SYRACUSE	14	85.7%	128	98.4%		
2	528	WESTERN NEW YORK HCS	15	93.3%	313	95.2%		
3	526	BRONX	10	100.0%	158	90.5%		
3	620	HUDSON VALLEY HCS	17	94.1%	153	90.2%		
3	561	NEW JERSEY HCS	23	95.7%	305	94.1%		
3	630	NEW YORK HARBOR HCS	23	100.0%	457	96.5%		
3	632	NORTHPORT	2	100.0%	136	97.1%		
4	540	CLARKSBURG	42	64.3%	119	73.1%		
4	542	COATESVILLE	22	100.0%	203	96.6%		
4	595	LEBANON	12	91.7%	193	99.0%		
4	642	PHILADELPHIA	27	100.0%	304	95.7%		
4	646	PITTSBURGH HCS	11	81.8%	424	96.2%		
4	693	WILKES BARRE	4	100.0%	113	94.7%	75	98.7%
5	613	MARTINSBURG	23	87.0%	294	91.5%	49	95.9%
5	512	MARYLAND HCS	31	87.1%	696	89.8%	1	100.0%
5	688	WASHINGTON DC	13	100.0%	360	95.0%	96	96.9%
6	637	ASHEVILLE	36	88.9%	106	94.3%		
6	558	DURHAM	39	100.0%	297	94.9%		
6	565	FAYETTEVILLE NC	22	95.5%	229	98.3%		
6	590	HAMPTON	77	98.7%	508	96.3%		
6	652	RICHMOND	14	100.0%	241	95.4%		
6	658	SALEM	107	72.9%	270	95.6%		
6	659	SALISBURY	76	44.7%	315	97.1%		
7	508	ATLANTA	40	95.0%	344	95.9%	99	94.9%
7	509	AUGUSTA	75	100.0%	443	97.3%		
7	619	CENTRAL ALABAMA VETERANS HCS	50	96.0%	317	96.5%		
7	534	CHARLESTON	17	100.0%	214	97.2%		
7	544	COLUMBIA SC	27	96.3%	165	93.3%		
7	679	TUSCALOOSA	13	100.0%	192	96.9%		
8	516	BAY PINES	24	95.8%	331	98.8%		
8	546	MIAMI	8	100.0%	279	94.3%		
8	573	NO. FL/SO. GA VETERANS HS	14	100.0%	423	95.5%		
8	672	SAN JUAN PR	3	100.0%	378	98.7%		
8	673	TAMPA	22	100.0%	396	97.2%		
8	548	W PALM BEACH	39	100.0%	308	95.8%		
9	596	LEXINGTON	9	88.9%	196	95.9%	50	94.0%
9	603	LOUISVILLE	9	88.9%	313	92.7%		
9	614	MEMPHIS	34	88.2%	364	92.6%		
9	626	MIDDLE TENN HCS	31	96.8%	678	87.8%		
9	621	MOUNTAIN HOME	46	91.3%	270	88.9%		
10	538	CHILLICOTHE	22	81.8%	356	87.4%	31	100.0%
10	539	CINCINNATI	16	93.8%	194	94.3%		
10	541	CLEVELAND	6	100.0%	487	96.1%	82	95.1%
10	552	DAYTON	10	100.0%	261	95.4%	10	100.0%



Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2003 to March 31, 2004, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no. PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
11	553	ALLEN PARK	3	100.0%	253	99.2%	177	98.9%
11	506	ANN ARBOR HCS	7	100.0%	178	98.9%		
11	515	BATTLE CREEK	28	96.4%	449	97.1%		
11	550	ILLIANA HCS	5	60.0%	154	87.0%		
11	583	INDIANAPOLIS	5	60.0%	174	93.7%		
11	610	NORTHERN INDIANA HCS	8	100.0%	136	96.3%		
12	537	CHICAGO HCS	28	100.0%	421	97.1%		
12	578	HINES	8	100.0%	339	95.9%		
12	607	MADISON	5	100.0%	156	98.1%		
12	695	MILWAUKEE	8	100.0%	284	99.3%	132	100.0%
12	556	NORTH CHICAGO	17	88.2%	233	67.4%		
12	676	TOMAH	2	100.0%	109	88.1%		
15	543	COLUMBIA MO	17	94.1%	155	93.5%		
15	677	EASTERN KANSAS HCS	94	57.4%	464	96.8%		
15	657	HEARTLAND-EAST HCS	34	97.1%	757	95.5%		
15	589	HEARTLAND-WEST	6	100.0%	334	95.5%		
16	502	ALEXANDRIA	5	100.0%	227	99.1%		
16	598	CENTRAL ARKANSAS HCS	32	93.8%	358	93.0%		
16	564	FAYETTEVILLE AR	13	92.3%	229	96.5%		
16	520	GULF COAST HCS	32	100.0%	527	91.1%		
16	580	HOUSTON	28	89.3%	431	94.2%	29	93.1%
16	586	JACKSON	9	88.9%	239	95.4%		
16	629	NEW ORLEANS	23	100.0%	262	96.9%		
16	635	OKLAHOMA CITY	13	92.3%	331	96.1%		
16	667	SHREVEPORT	2	100.0%	282	95.0%		
17	674	CENTRAL TEXAS VETERANS HCS	42	92.9%	291	90.7%		
17	549	NORTH TEXAS HCS	11	81.8%	510	95.3%		
17	671	SOUTH TEXAS VETERANS HCS	53	96.2%	648	97.5%		
18	501	NEW MEXICO HCS	25	96.0%	266	95.9%		
18	644	PHOENIX	34	91.2%	613	94.8%		
18	678	SOUTHERN ARIZONA	55	98.2%	184	96.2%	103	93.2%
19	554	DENVER	81	87.7%	247	94.3%		
19	575	GRAND JUNCTION	8	100.0%	92	94.6%		
19	660	SALT LAKE CITY HCS	9	100.0%	271	96.3%		
19	666	SHERIDAN	24	95.8%	187	93.6%		
20	531	BOISE	17	58.8%	130	97.7%		
20	648	PORTLAND	14	100.0%	259	96.9%		
20	663	PUGET SOUND HCS	184	97.8%	417	97.1%	130	96.9%
20	653	ROSEBURG HCS	72	62.5%	265	93.6%		
20	668	SPOKANE	3	100.0%	74	97.3%		
20	687	WALLA WALLA	5	100.0%	35	100.0%	25	96.0%
21	570	CENTRAL CALIFORNIA HCS	4	100.0%	143	94.4%	33	84.8%
21	459	HONOLULU	11	100.0%	107	97.2%		
21	640	PALO ALTO HCS	34	97.1%	467	97.4%	256	98.0%
21	662	SAN FRANCISCO	4	100.0%	110	92.7%		
21	654	SIERRA NEVADA HCS	6	83.3%	213	94.8%		
22	691	GREATER LOS ANGELES HCS	16	93.8%	487	94.7%		
22	605	LOMA LINDA	14	100.0%	278	95.0%		
22	600	LONG BEACH HCS	11	100.0%	196	96.4%		
22	664	SAN DIEGO HCS	7	100.0%	305	94.8%	121	96.7%
22	593	SOUTHERN NEVADA HCS	19	84.2%	185	89.7%		

Table 20. Residence in VISN in which VA treatment was received among veterans discharged from VA inpatient programs from October 1, 2003 to March 31, 2004, by PTSD diagnosis and program type, by VAMC†.

VISN	CODE	FACILITY	General Psych. Program: Primary Diagnosis PTSD		General Psych. Program: Non-PTSD Diagnosis		Substance Abuse Program: All Diagnoses	
			<i>Number of Unique Patients w PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients w. no PTSD Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>	<i>Number of Unique Patients Any Dx.</i>	<i>Reside in VISN in which treatment was delivered</i>
23	568	BLACK HILLS HCS	6	100.0%	91	94.5%		
23	555	CENTRAL IOWA HCS	8	87.5%	143	94.4%		
23	437	FARGO			84	94.0%		
23	584	IOWA CITY	5	100.0%	141	94.3%		
23	618	MINNEAPOLIS	4	100.0%	248	98.0%		
23	636	NEBRASKA- WESTERN IOWA HCS	2	100.0%	162	95.7%		
23	438	SIOUX FALLS	3	100.0%	101	98.0%		
23	656	ST CLOUD	12	91.7%	194	98.5%		
ALL VA			2690	90.3%	30558	95.0%	1869	97.1%
AVG			24	93.5%	273	95.0%	93	96.6%
SD			30	10.9%	146	4.3%	88	3.6%
CV			0.82	8.6%	1.87	21.9%	1.06	26.0%

† Does not include PRRP and domiciliary care.

## **PART II: TREATMENT OF VETERANS BY SPECIALIZED OUTPATIENT PTSD TEAMS**

Part II presents data on the clinical operation of the PTSD Clinical Team (PCT), Substance Use PTSD Team (SUPT) and Women's Stress Disorder Treatment Team (WSDTT) programs for FY 2004. The data presented in this chapter are derived from PTSD Status Forms (PSFs) that are completed by staff members for each veteran newly admitted to treatment by their specialized programs within FY 2004. A "newly admitted" veteran is defined as one who has not been in treatment with the particular specialized program in the past 12 months before this admission. This means that only one PSF per veteran per program within any 12-month period is kept in the dataset. "Treatment" is defined as more than one visit to the program for this episode of therapy.<sup>1</sup>

Throughout the presentation, variables assessing key aspects of the programs' specialized mission are designated as critical monitors. Other variables that are descriptive of the veteran population being served are presented to provide a more extensive picture. The data are evaluated at both the program and the VISN level. Programs that deviate by more than one standard deviation from the average for all programs are identified as outliers. In addition to comparing each individual program to the other programs, each VISN is compared to other VISNs.

### ***Comprehensive Evaluation and Monitoring Procedures***

VA's Northeast Program Evaluation Center (NEPEC), the Evaluation Division of the National Center for PTSD, monitors and evaluates the administrative and clinical operation of all of the specialized programs for PTSD. The patient-specific data presented in this section of the report were collected by clinicians whose primary responsibility was delivering clinical care rather than collecting data. Although some variation in administration and reporting is to be expected, several procedures were instituted to minimize this variation:

- a. *Manuals.* Detailed manuals were written describing the correct manner of administration of the questionnaire, the conventions for coding responses to ambiguous questions, and the recommended solutions to other common problems in data collection.
- b. *Individualized Training.* Each program designates two staff persons to serve as the local director and data manager of the monitoring protocol. Individualized training is given over the telephone to these staff persons for each new program that is added to the national network and to each new staff member of an existing program who has been designated as director or data manager.

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<sup>1</sup> In Part III, data are presented for "New vets treated" as determined from the Stop Code data. "New vets treated" in Part III is defined as those veterans who have more than one visit recorded in the Austin Outpatient File within FY 2004 but no visits during the previous fiscal year. It should be noted that the definition of "new vets treated" in Part III is more stringent than the definition of "newly admitted" veterans in Part II. The definition of "treated" remains the same, that is, seen more than once.

c. *Data Reporting and Management.* Data managers enter the data that have been collected by clinicians electronically into the National Mental Health Data Base located at the Pittsburgh VA Medical Center at Highland Drive. Each month, NEPEC downloads these data from Pittsburgh and appends them to a master file. The new data are reviewed at NEPEC for errors and inconsistencies. When problems are identified, they are corrected through telephone calls or letters to the programs.

d. *Contact with the programs.* Feedback on the progress of data collection and discussion of systematic changes in the conduct of the evaluation take place during monthly conference calls in which all programs are invited to participate. Tables summarizing monthly data by program are distributed by mail and displayed on the VA Intranet.

### ***Rationale of the Monitoring Protocol***

Specialized treatment of PTSD is a relatively new clinical activity, requiring considerable freedom for clinical innovation. Evaluation efforts are based on the assumption that rigid regulations or performance standards are not appropriate for the programs in their current stages of development, and that premature standardization might stifle the creative evolution of new interventions or combinations of existing interventions that would prove to be particularly efficacious. At the same time, it is important to evaluate the programs as completely and objectively as possible.

Although absolute practice standards have not been established for the treatment of PTSD, statistical norms can be derived from the distribution of data across the individual programs. The distinction between statistical norms and formal practice standards is an important one. Practice standards are established by a consensus of professionals and codify how health care should be conducted. Statistical norms, in contrast, reflect how health care is practiced on average, without specifying exactly what is and what is not acceptable practice. Practice variation can be measured and statistical outliers can be identified. The identification of statistical outliers must not be confused with the identification of practice standard violations. Statistical outliers are extremes on a continuum and, as such, deserve attention. However, without further exploration of specific circumstances, no conclusions can be drawn regarding their exact meaning.

### ***Monitoring Instrument***

A three-page PTSD Status Form (PSF) is used to monitor the most salient characteristics of the veterans being treated by the outpatient specialized PTSD programs. The PSF includes the principal demographic, military, social adjustment, and diagnostic information from the War Stress Interview - Part 1 (WSI-1). The WSI-1 was one of the primary instruments that were used in earlier, more intensive studies of the implementation and outcomes of the specialized

outpatient PTSD programs. The PSF was revised a few years ago by the addition of two questions of special interest to VA leadership: evaluation of PTSD due to military sexual trauma and evaluation of PTSD due to military noncombat nonsexual trauma.

### ***Critical Monitors for Outpatient Programs***

Through the selection of critical monitors, we have sought to highlight those features of the operation of the programs that are most relevant to their specialized mission. Six of the evaluation measures were selected as critical monitors for outpatient programs. The first five are characteristics of the population being served: war zone service, clinical diagnosis of PTSD, diagnosis of substance abuse, prior psychiatric treatment of any type, and prior specialized PTSD treatment in particular. The other critical monitor concerns the performance of program staff: validation of war zone service by the DD214. The directionality of these monitors that is in accordance with the programs' mission is **high** percentages of war zone service, diagnoses of PTSD and substance abuse, and the validation of war zone service by the DD214. **Low** percentages of veterans who had prior specialized PTSD treatment or psychiatric treatment of any type are in accordance with the programs' defined mission.

It must, once again, be emphasized that these monitors should not necessarily be considered, by themselves, to be indicators of the appropriateness of the administrative or clinical operation of particular programs. They can properly be used only to identify statistical outliers, the importance of which must be determined by follow-up discussions with the programs. Since any modification of administrative and/or clinical practices must take place at the level of the individual program, it is essential that an evaluation examine the data at both this level as well as at the VISN level.

### ***Comparison of VISNs and Individual Programs on Critical Monitors***

Outlier performance is indicated by any value that is 1 standard deviation from the mean of all VISNs or of all specialized programs, and is marked by a boxed cell. Outlier status for the VISNs as a whole is presented in Tables 2-1 and 2-3. The particular individual programs contributing most prominently to the VISNs' outlier status are identified in Tables 2-2 and 2-4. Table 2-7 summarizes the number of critical monitors that are outliers for each VISN. The WSDTTs were not included in the calculation of outliers on the critical monitor War Zone Service, because until recently women did not typically serve in war zones.

VISNs 1, 19 and 20 are outliers in veterans' **war zone service**. The particular programs contributing most to the outlier status in these VISNs are the Boston HCS (Boston) PCT and the White River Junction PCT in VISN 1; the Cheyenne PCT and the Grand Junction PCT within VISN 19, and the Boise PCT, the Portland PCT and the two Puget Sound HCS PCTs at American Lake and Seattle within VISN 20. Other individual programs that are outliers are the Syracuse PCT within VISN 2; the Maryland HCS PCTs at Baltimore and Perry Point within VISN 5; the Northern Indiana HCS (Fort Wayne) PCT within VISN 11; and the Black Hills HCS (Fort Meade) SUPT in VISN 23. The percentage of veterans who have served in a war zone is lower in these VISNs and individual programs than in other VISNs and programs.

VISNs 1, 5, 8, 11 and 23 are outliers in ***PTSD clinical diagnosis***. The particular programs contributing most to the outlier status in these VISNs are the Boston HCS (Boston) WSDTT within VISN 1; the Maryland HCS PCT at Perry Point within VISN 5; the Tampa PCT within VISN 8; the Ann Arbor PCT within VISN 11; and the Minneapolis PCT in VISN 23. Individual programs which are outliers in other VISNs are the Pittsburgh HCS (Highland Drive) PCT and SUPT within VISN 4; the Charleston PCT within VISN 7; the Madison WSDTT in VISN 12; the Wichita PCT within VISN 15; the Fayetteville AR PCT, the New Orleans WSDTT, and the Oklahoma City PCT within VISN 16; the Southern Arizona HCS (Tucson) PCT in VISN 18; the Boise and the Portland PCTs within VISN 20; and the Loma Linda WSDTT within VISN 22. The percentage of veterans who have a clinical diagnosis of PTSD is lower in these VISNs and individual programs than in others.

VISNs 6, 10, 15, 16 and 22 are outliers in ***substance abuse diagnosis***. Within these VISNs the particular programs contributing most to the outlier status are the Asheville PCT, the Durham PCT and the Fayetteville NC PCT within VISN 6; the Chillicothe PCT, the Cincinnati PCT and the Columbus PCT in VISN 10; the St. Louis PCT within VISN 15; the Muskogee PCT and the New Orleans WSDTT in VISN 16; and the Southern Nevada HCS (Las Vegas) PCT within VISN 22. Other individual programs that are outliers are the Western New York HCS (Batavia) PCT within VISN 2; the Augusta PCT within VISN 7; the San Juan PCT within VISN 8; the Huntington PCT and the Lexington PCT within VISN 9; and the Salt Lake City PCT within VISN 19. The percentage of veterans who are diagnosed with a substance abuse disorder is lower in these VISNs and individual programs than in others.

VISNs 1, 3 and 18 are outliers in ***validation of war zone service by DD214***. Within these VISNs the particular programs contributing most to the outlier status are the Connecticut HCS (West Haven) PCT and SUPT and the Providence PCT in VISN 1; the New Jersey HCS (East Orange) PCT and the New York Harbor HCS (Brooklyn) PCT in VISN 3; and the Southern Arizona HCS (Tucson) PCT within VISN 18.

In addition, other programs which are outliers are the Maryland HCS (Baltimore) PCT in VISN 5; the Augusta and Charleston PCTs within VISN 7; the San Juan PCT and the Tampa PCT within VISN 8; the Lexington PCT in VISN 9; the Northern Indiana HCS (Fort Wayne) PCT in VISN 11; the Madison WSDTT in VISN 12; the Houston PCT and the Jackson PCT within VISN 16; the Central Texas Veterans HCS (Austin) and (Temple) PCTs within VISN 17; the Puget Sound HCS (Seattle) PCT within VISN 20; and the Loma Linda WSDTT in VISN 22. The percentage of veterans admitted to treatment without having their war zone service verified by reference to the DD214 or similar military records is lower in these VISNs and individual programs than it is in others.

VISNs 4, 7 and 19 are outliers in admitting higher percentages of veterans who have had ***prior psychiatric treatment***. Within these VISNs the particular programs contributing most to the outlier status are the Pittsburgh HCS (Highland Drive) SUPT in VISN 4; the Birmingham PCT and the Dublin PCT in VISN 7; and the Cheyenne PCT and the Grand Junction PCT in VISN 19.

Individual programs which are outliers in other VISNs include the Connecticut HCS (West Haven) SUPT within VISN 1; the Maryland HCS (Perry Point) PCT in VISN 5; the Asheville PCT in VISN 6; the San Juan PCT within VISN 8; the Northern Indiana HCS (Marion) PCT in VISN 11; the Poplar Bluff PCT in VISN 15; the Central Arkansas Veterans HCS (No. Little Rock) PCT, the Muskogee PCT and the Shreveport PCT within VISN 16; the North Texas HCS (Dallas) in VISN 17; the San Francisco SUPT in VISN 21; and the Loma Linda PCT within VISN 22. The percentage of veterans who have had prior psychiatric treatment was higher in these VISNs and individual programs than in others.

VISNs 4 and 19 are outliers in admitting veterans who have had ***prior specialized PTSD treatment***. The particular programs contributing most to the outlier status of these VISNs are the Coatesville PCT, the Philadelphia PCT and the Pittsburgh HCS (Highland Drive) SUPT within VISN 4, and the Cheyenne PCT within VISN 19. Outlier programs within other VISNs include the Connecticut HCS (West Haven) SUPT within VISN 1; the Bronx PCT and the Hudson Valley HCS (Castle Point) PCT within VISN 3; the Maryland HCS (Baltimore) PCT in VISN 5; the Asheville PCT in VISN 6; the Birmingham PCT within VISN 7; the Brecksville WSDTT within VISN 10; the Northern Indiana HCS (Marion) PCT in VISN 11; the Chicago HCS (West Side) PCT within VISN 12; the Poplar Bluff PCT in VISN 15; the Central Arkansas Veterans HCS (No. Little Rock) PCT, the Gulf Coast Veterans HCS (Gulfport) PCT, and the Shreveport PCT within VISN 16; the Phoenix PCT in VISN 18; the Puget Sound HCS (Seattle) PCT in VISN 20, and the San Francisco SUPT within VISN 21. The percentage of veterans who have had prior specialized PTSD treatment was higher in these VISNs and individual programs than in others.

The number of critical monitors that were outliers is tabulated for each VISN in Table 2-7. Adjustment for the different number of programs across the VISNs was made by calculating the mean number of outliers for each VISN. VISNs that are outliers for the outliers themselves are VISNs 4, 5, 19 and VISN 20. The mean number of outliers was higher in these VISNs than in others.

### ***Description of Veterans' Other Characteristics***

Several other veterans' characteristics are presented for descriptive purposes in Tables 2-5, 2-8, 2-10, 2-12, 2-12A, 2-14, 2-16, 2-18 and 2-20 for the VISNs and Tables 2-6, 2-9, 2-11, 2-13, 2-13A, 2-15, 2-17, 2-19 and 2-21 for individual programs. These characteristics have not been designated as critical monitors because they have not been considered critical for evaluating the operation of the programs with regard to carrying out the mission of specialized PTSD programs. Further, outliers have not been identified because it is often not possible to define one tail of the distribution as more or less desirable than the other tail. A description of the population being served by the programs can be summarized at the VISN level as follows.

Beginning in May 2004 we have collected data on the percentage of veterans who served in the US military since September 11, 2001, in Afghanistan, in Iraq, or ever served in a peacekeeping operation.

Veterans averaged 54.7 years of age (sd=1.7). Ninety-one percent (sd=3%) had a high school education or more, and 67% (sd=4%) were not working currently. Eighteen percent (sd=7%) reported difficulty controlling violent behavior. Ninety-four percent (sd=5%) were male; and currently 57% (sd=9%) were married, 32% (sd=5%) were separated or divorced, and 9% (sd=4%) had never been married. Sixty-six percent (sd=18%) were Caucasian, 23% (sd=18%) African-American, 8% (sd=10%) Hispanic and 4% (sd=4%) were of other racial/ethnic background.

Four percent (sd=2%) served during the World War II era, 4% (sd=2%) during the Korean War era, 72% (sd=7%) during the Vietnam War era, and 15% (sd=4%) during the Persian Gulf War era. Two percent (sd=2%) served in Afghanistan, 8% (sd=6%) served in Iraq, and 3 percent (sd=2%) ever served in a peacekeeping operation. Eighty-two percent (sd=8%) were exposed to enemy/friendly fire; 7% (sd=3%) participated in atrocities; and 2% (sd=1%) were prisoners of war. Sixty percent (sd=6%) of the veterans were service connected.

At the time of admission to the programs, 64% (sd=10%) of the veterans were already prescribed psychotropic medications; 42% (sd=12%) were diagnosed with an Axis I nonpsychotic disorder other than PTSD; 6% (sd=3%) were diagnosed with an Axis I psychotic disorder; and 8% (sd=5%) were diagnosed with an Axis II personality disorder. Eighty-two percent (sd=9%) of the veterans were referred by another VAMC program; 4% (sd=3%) were referred from a Vet Center; 10% (sd=7%) were self-referred; and 3% (sd=3%) were referred from other sources. Eighty percent (sd=4%) of the veterans reported having a chronic medical problem which interfered with their lives; 12% (sd=3%) reported having been incarcerated for more than two weeks over their lifetime; 9% (sd=10%) were evaluated for PTSD due to sexual trauma which occurred during active military duty, and 12% (sd=9%) were evaluated for PTSD due to noncombat nonsexual trauma incurred in the course of military duties.



Table 2-1. War Zone Service and Clinical Diagnosis Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation By DD214
1	510	68%	73%	86%	38%	39%
2	237	82%	86%	97%	25%	84%
3	455	93%	85%	95%	34%	24%
4	270	91%	89%	97%	45%	67%
5	699	80%	74%	89%	47%	58%
6	753	92%	96%	97%	23%	69%
7	718	89%	85%	92%	36%	66%
8	586	86%	74%	87%	33%	75%
9	376	94%	97%	98%	37%	84%
10	655	91%	96%	98%	22%	92%
11	428	86%	73%	88%	35%	63%
12	221	82%	92%	93%	48%	80%
15	615	93%	93%	95%	18%	60%
16	1,535	91%	84%	89%	24%	70%
17	1,225	89%	89%	97%	42%	61%
18	649	87%	86%	97%	27%	45%
19	156	71%	96%	97%	33%	72%
20	1,020	73%	77%	85%	39%	74%
21	365	92%	93%	98%	29%	75%
22	727	88%	89%	97%	23%	86%
23	798	82%	74%	93%	35%	85%
TOTAL	12,998					
MEAN	619	86%	86%	94%	33%	68%
S.D	338	7%	8%	5%	9%	17%

Boxed cell indicates an outlier in the undesirable direction.

\*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
1	BOSTON HCS: Boston	PCT	96	68%	70%	80%	36%	46%
1	BOSTON HCS: Boston	WSDTT	88	25%	48%	69%	45%	72%
1	BOSTON HCS: Brockton	PCT	35	94%	91%	97%	51%	91%
1	CONNECTICUT HCS: West Haven	PCT	145	81%	72%	90%	15%	14%
1	CONNECTICUT HCS: West Haven	SUPT	50	82%	82%	92%	92%	12%
1	PROVIDENCE	PCT	47	85%	96%	96%	41%	9%
1	WHITE RIVER JUNCTION	PCT	49	61%	82%	96%	25%	63%
2	CANANDAIGUA	PCT	119	85%	85%	98%	34%	86%
2	SYRACUSE	PCT	68	76%	82%	97%	18%	78%
2	WESTERN NY HCS: Batavia	PCT	50	84%	94%	96%	12%	88%
3	BRONX	PCT	8	100%	88%	100%	13%	63%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	95%	75%	75%	80%	50%
3	NEW JERSEY HCS: East Orange	PCT	83	93%	99%	99%	61%	12%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	95%	79%	97%	26%	5%
3	NEW YORK HARBOR HCS: New York	PCT	94	89%	88%	89%	42%	76%
4	COATESVILLE	PCT	72	94%	97%	99%	31%	92%
4	PHILADELPHIA	PCT	129	88%	98%	99%	50%	65%
4	PITTSBURGH HCS: Highland Drive	PCT	41	98%	63%	88%	20%	51%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	89%	68%	96%	100%	39%
5	MARYLAND HCS: Baltimore	PCT	226	72%	69%	88%	47%	11%
5	MARYLAND HCS: Perry Point	PCT	155	55%	55%	89%	65%	76%
5	WASHINGTON DC	PCT	318	98%	87%	89%	38%	82%
6	ASHEVILLE	PCT	50	100%	96%	100%	6%	100%
6	DURHAM	PCT	148	91%	92%	93%	6%	81%
6	FAYETTEVILLE NC	PCT	55	100%	91%	95%	11%	98%
6	HAMPTON	PCT	251	89%	95%	96%	36%	77%
6	SALISBURY	PCT	249	92%	100%	100%	23%	41%
7	ATLANTA	PCT	111	85%	72%	89%	25%	51%
7	AUGUSTA	PCT	39	90%	92%	100%	5%	8%
7	BIRMINGHAM	PCT	160	93%	94%	98%	40%	89%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	84%	95%	98%	37%	69%
7	CHARLESTON	PCT	147	83%	63%	78%	41%	30%
7	DUBLIN	PCT	157	98%	97%	97%	43%	99%
8	BAY PINES	SUPT	252	85%	78%	91%	37%	86%
8	MIAMI	PCT	60	82%	72%	90%	23%	95%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	88%	77%	81%	39%	89%
8	SAN JUAN	PCT	41	98%	83%	98%	2%	12%
8	TAMPA	PCT	79	82%	51%	75%	29%	33%
9	HUNTINGTON	PCT	26	100%	100%	100%	8%	100%
9	LEXINGTON	PCT	44	98%	98%	98%	0%	30%
9	LOUISVILLE	PCT	41	83%	88%	90%	24%	78%
9	MEMPHIS	PCT	105	95%	99%	99%	52%	97%
9	MOUNTAIN HOME	PCT	160	93%	98%	100%	44%	89%
10	BRECKSVILLE	PCT	181	97%	99%	99%	37%	95%
10	BRECKSVILLE	WSDTT	18	33%	100%	100%	33%	67%
10	CHILLICOTHE	PCT	127	95%	100%	100%	2%	100%
10	CINCINNATI	PCT	111	80%	85%	95%	9%	86%
10	COLUMBUS	PCT	96	100%	100%	100%	1%	86%
10	DAYTON	PCT	122	86%	97%	98%	48%	92%
11	ANN ARBOR HCS	PCT	137	84%	55%	68%	46%	74%
11	BATTLE CREEK	PCT	48	96%	90%	96%	54%	65%
11	DANVILLE	PCT	108	94%	87%	98%	35%	99%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	78%	74%	98%	16%	18%
11	NORTHERN IN HCS: Marion	PCT	10	90%	90%	90%	40%	60%

Table 2-2. War Zone Service and Clinical Diagnosis Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	War Zone Service*	PTSD Clinical Diagnosis	Combined PTSD/PTSS Diagnosis	Substance Abuse Diagnosis	Validation by DD214
12	CHICAGO HCS: West Side	PCT	139	89%	97%	99%	54%	90%
12	HINES	PCT	53	100%	98%	98%	47%	91%
12	MADISON	WSDTT	29	14%	55%	59%	24%	10%
15	EASTERN KS HCS: Topeka	PCT	53	85%	91%	100%	43%	60%
15	KANSAS CITY	PCT	264	93%	97%	97%	17%	59%
15	POPLAR BLUFF	PCT	52	94%	100%	100%	13%	92%
15	ST. LOUIS	PCT	166	97%	99%	100%	7%	47%
15	WICHITA	PCT	80	88%	65%	74%	31%	73%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	93%	97%	100%	62%	95%
16	FAYETTEVILLE AR	PCT	138	86%	62%	76%	21%	93%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	96%	96%	98%	20%	61%
16	HOUSTON	PCT	454	87%	71%	78%	31%	32%
16	JACKSON	PCT	75	88%	69%	85%	19%	32%
16	MUSKOGEE	PCT	444	98%	99%	99%	9%	99%
16	NEW ORLEANS	PCT	129	92%	99%	100%	22%	77%
16	NEW ORLEANS	WSDTT	25	48%	64%	80%	12%	68%
16	OKLAHOMA CITY	PCT	18	89%	33%	39%	29%	83%
16	SHREVEPORT	PCT	30	100%	100%	100%	13%	93%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	82%	97%	98%	47%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	88%	78%	100%	26%	11%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	97%	72%	92%	73%	99%
17	NORTH TX HCS: Dallas	PCT	181	92%	93%	94%	26%	99%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	91%	91%	97%	47%	84%
18	EL PASO VETERANS HCS	PCT	105	92%	80%	90%	35%	42%
18	NEW MEXICO HCS: Albuquerque	PCT	173	82%	96%	99%	34%	58%
18	PHOENIX	PCT	231	93%	96%	99%	24%	59%
18	SOUTHERN AZ HCS: Tucson	PCT	140	79%	63%	96%	16%	6%
19	CHEYENNE	PCT	66	59%	92%	95%	32%	50%
19	GRAND JUNCTION	PCT	57	75%	100%	100%	49%	95%
19	SALT LAKE CITY HCS	PCT	33	88%	94%	97%	6%	79%
20	BOISE	PCT	86	55%	44%	57%	24%	41%
20	PORTLAND	PCT	336	70%	68%	69%	46%	96%
20	PUGET SOUND HCS: American Lake	PCT	292	76%	85%	98%	30%	81%
20	PUGET SOUND HCS: Seattle	PCT	172	75%	92%	99%	41%	26%
20	SPOKANE	PCT	134	87%	87%	93%	52%	89%
21	HONOLULU	PCT	23	87%	87%	96%	17%	100%
21	NORTHERN CA HCS	PCT	120	95%	95%	99%	13%	63%
21	PALO ALTO HCS: San Jose	PCT	40	90%	93%	98%	15%	98%
21	SAN FRANCISCO	PCT	151	91%	93%	98%	34%	78%
21	SAN FRANCISCO	SUPT	31	97%	94%	97%	94%	61%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	99%	79%	93%	16%	93%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	86%	91%	98%	58%	93%
22	LOMA LINDA	PCT	67	99%	91%	100%	44%	96%
22	LOMA LINDA	WSDTT	32	16%	41%	94%	25%	28%
22	SAN DIEGO HCS CA	PCT	196	85%	90%	95%	17%	68%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	95%	98%	99%	3%	100%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	72%	78%	85%	52%	97%
23	CENTRAL IA HCS: Knoxville	PCT	105	84%	69%	100%	17%	72%
23	IOWA CITY	PCT	223	78%	74%	91%	37%	98%
23	MINNEAPOLIS	PCT	195	91%	57%	87%	27%	62%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	85%	90%	100%	40%	100%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	79%	96%	100%	45%	94%
TOTAL			12,998					
MEAN			123	88%	84%	93%	32%	67%
S.D.			95	10%	15%	11%	20%	29%

Boxed cell indicates an outlier in the undesirable direction.

\*Data for WSDTTs were not included in the formulas to determine the mean and standard deviation for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-3. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	510	72%	21%
2	237	68%	18%
3	455	54%	20%
4	270	78%	44%
5	699	70%	25%
6	753	69%	15%
7	718	76%	22%
8	586	74%	24%
9	376	67%	7%
10	655	60%	15%
11	428	73%	16%
12	221	75%	25%
15	615	67%	13%
16	1,535	73%	16%
17	1,225	73%	12%
18	649	63%	23%
19	156	79%	33%
20	1,020	70%	25%
21	365	63%	20%
22	727	61%	15%
23	798	70%	13%
TOTAL	12,998		
MEAN		69%	20%
S.D		6%	8%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
1	BOSTON HCS: Boston	PCT	96	80%	13%
1	BOSTON HCS: Boston	WSDTT	88	78%	25%
1	BOSTON HCS: Brockton	PCT	35	66%	23%
1	CONNECTICUT HCS: West Haven	PCT	145	61%	21%
1	CONNECTICUT HCS: West Haven	SUPT	50	92%	34%
1	PROVIDENCE	PCT	47	55%	15%
1	WHITE RIVER JUNCTION	PCT	49	73%	16%
2	CANANDAIGUA	PCT	119	68%	16%
2	SYRACUSE	PCT	68	57%	13%
2	WESTERN NY HCS: Batavia	PCT	50	80%	28%
3	BRONX	PCT	8	50%	50%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	85%	40%
3	NEW JERSEY HCS: East Orange	PCT	83	29%	25%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	57%	15%
3	NEW YORK HARBOR HCS: New York	PCT	94	64%	21%
4	COATESVILLE	PCT	72	71%	36%
4	PHILADELPHIA	PCT	129	80%	60%
4	PITTSBURGH HCS: Highland Drive	PCT	41	73%	7%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	100%	43%
5	MARYLAND HCS: Baltimore	PCT	226	78%	38%
5	MARYLAND HCS: Perry Point	PCT	155	92%	22%
5	WASHINGTON DC	PCT	318	53%	17%
6	ASHEVILLE	PCT	50	86%	38%
6	DURHAM	PCT	148	70%	16%
6	FAYETTEVILLE NC	PCT	55	81%	18%
6	HAMPTON	PCT	251	64%	15%
6	SALISBURY	PCT	249	68%	9%
7	ATLANTA	PCT	111	72%	13%
7	AUGUSTA	PCT	39	76%	15%
7	BIRMINGHAM	PCT	160	86%	60%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	72%	10%
7	CHARLESTON	PCT	147	54%	15%
7	DUBLIN	PCT	157	92%	5%
8	BAY PINES	SUPT	252	72%	32%
8	MIAMI	PCT	60	75%	20%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	69%	22%
8	SAN JUAN	PCT	41	90%	17%
8	TAMPA	PCT	79	77%	5%
9	HUNTINGTON	PCT	26	31%	0%
9	LEXINGTON	PCT	44	50%	9%
9	LOUISVILLE	PCT	41	56%	5%
9	MEMPHIS	PCT	105	83%	9%
9	MOUNTAIN HOME	PCT	160	71%	8%
10	BRECKSVILLE	PCT	181	74%	15%
10	BRECKSVILLE	WSDTT	18	78%	33%
10	CHILLICOTHE	PCT	127	31%	1%
10	CINCINNATI	PCT	111	76%	25%
10	COLUMBUS	PCT	96	27%	6%
10	DAYTON	PCT	122	77%	25%
11	ANN ARBOR HCS	PCT	137	82%	7%
11	BATTLE CREEK	PCT	48	79%	15%
11	DANVILLE	PCT	108	66%	8%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	66%	31%
11	NORTHERN IN HCS: Marion	PCT	10	90%	40%

Table 2-4. Prior Treatment Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Prior Psych. Treatment	Prior Spec. PTSD Treatment
12	CHICAGO HCS: West Side	PCT	139	73%	36%
12	HINES	PCT	53	79%	8%
12	MADISON	WSDTT	29	75%	3%
15	EASTERN KS HCS: Topeka	PCT	53	70%	13%
15	KANSAS CITY	PCT	264	62%	9%
15	POPLAR BLUFF	PCT	52	94%	33%
15	ST. LOUIS	PCT	166	63%	15%
15	WICHITA	PCT	80	69%	9%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	98%	42%
16	FAYETTEVILLE AR	PCT	138	71%	19%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	75%	34%
16	HOUSTON	PCT	454	52%	7%
16	JACKSON	PCT	75	73%	29%
16	MUSKOGEE	PCT	444	89%	11%
16	NEW ORLEANS	PCT	129	64%	16%
16	NEW ORLEANS	WSDTT	25	68%	12%
16	OKLAHOMA CITY	PCT	18	44%	6%
16	SHREVEPORT	PCT	30	87%	43%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	66%	11%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	74%	25%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	55%	15%
17	NORTH TX HCS: Dallas	PCT	181	93%	9%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	71%	8%
18	EL PASO VETERANS HCS	PCT	105	51%	15%
18	NEW MEXICO HCS: Albuquerque	PCT	173	77%	24%
18	PHOENIX	PCT	231	60%	33%
18	SOUTHERN AZ HCS: Tucson	PCT	140	59%	10%
19	CHEYENNE	PCT	66	86%	50%
19	GRAND JUNCTION	PCT	57	86%	25%
19	SALT LAKE CITY HCS	PCT	33	52%	12%
20	BOISE	PCT	86	66%	20%
20	PORTLAND	PCT	336	75%	29%
20	PUGET SOUND HCS: American Lake	PCT	292	67%	21%
20	PUGET SOUND HCS: Seattle	PCT	172	75%	34%
20	SPOKANE	PCT	134	63%	19%
21	HONOLULU	PCT	23	65%	4%
21	NORTHERN CA HCS	PCT	120	58%	16%
21	PALO ALTO HCS: San Jose	PCT	40	10%	3%
21	SAN FRANCISCO	PCT	151	74%	25%
21	SAN FRANCISCO	SUPT	31	97%	48%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	49%	13%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	70%	9%
22	LOMA LINDA	PCT	67	88%	10%
22	LOMA LINDA	WSDTT	32	84%	13%
22	SAN DIEGO HCS CA	PCT	196	67%	28%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	42%	8%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	80%	15%
23	CENTRAL IA HCS: Knoxville	PCT	105	67%	13%
23	IOWA CITY	PCT	223	74%	8%
23	MINNEAPOLIS	PCT	195	70%	18%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	51%	11%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	69%	16%
TOTAL			12,998		
MEAN			123	70%	20%
S.D.			95	16%	13%

Boxed cell indicates an outlier in the undesirable direction.

Table 2-5. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Age	High School Education Or More	Not Working	Violent Behavior
1	510	51.1	91%	58%	12%
2	237	54.2	87%	64%	10%
3	455	54.9	88%	65%	15%
4	270	55.0	93%	68%	21%
5	699	53.2	92%	68%	20%
6	753	55.6	89%	64%	20%
7	718	55.2	92%	68%	29%
8	586	54.7	92%	71%	13%
9	376	56.7	84%	66%	27%
10	655	55.6	90%	69%	12%
11	428	55.3	91%	72%	12%
12	221	53.2	88%	71%	20%
15	615	56.1	87%	64%	22%
16	1,535	55.7	91%	70%	14%
17	1,225	55.1	90%	59%	16%
18	649	56.9	93%	68%	17%
19	156	51.3	96%	69%	29%
20	1,020	52.2	95%	69%	20%
21	365	57.0	94%	71%	8%
22	727	54.8	91%	69%	34%
23	798	54.0	94%	60%	10%
TOTAL	12,998				
MEAN	619	54.7	91%	67%	18%
S.D	338	1.7	3%	4%	7%

Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
1	BOSTON HCS: Boston	PCT	96	51.8	92%	55%	12%
1	BOSTON HCS: Boston	WSDTT	88	43.2	100%	53%	5%
1	BOSTON HCS: Brockton	PCT	35	54.3	89%	60%	37%
1	CONNECTICUT HCS: West Haven	PCT	145	52.9	92%	53%	6%
1	CONNECTICUT HCS: West Haven	SUPT	50	52.7	82%	73%	29%
1	PROVIDENCE	PCT	47	56.4	79%	62%	0%
1	WHITE RIVER JUNCTION	PCT	49	49.6	90%	69%	25%
2	CANANDAIGUA	PCT	119	55.5	84%	64%	12%
2	SYRACUSE	PCT	68	50.5	94%	60%	7%
2	WESTERN NY HCS: Batavia	PCT	50	56.0	84%	70%	10%
3	BRONX	PCT	8	53.5	100%	100%	25%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	54.7	90%	50%	5%
3	NEW JERSEY HCS: East Orange	PCT	83	59.1	83%	59%	10%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	54.3	87%	65%	7%
3	NEW YORK HARBOR HCS: New York	PCT	94	52.7	93%	70%	43%
4	COATESVILLE	PCT	72	56.3	94%	57%	24%
4	PHILADELPHIA	PCT	129	54.9	95%	74%	17%
4	PITTSBURGH HCS: Highland Drive	PCT	41	54.2	88%	54%	13%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	53.3	89%	86%	43%
5	MARYLAND HCS: Baltimore	PCT	226	53.2	94%	72%	13%
5	MARYLAND HCS: Perry Point	PCT	155	50.1	92%	81%	58%
5	WASHINGTON DC	PCT	318	54.6	91%	60%	5%
6	ASHEVILLE	PCT	50	56.7	94%	84%	60%
6	DURHAM	PCT	148	55.5	92%	70%	23%
6	FAYETTEVILLE NC	PCT	55	56.4	95%	80%	25%
6	HAMPTON	PCT	251	54.5	91%	59%	15%
6	SALISBURY	PCT	249	56.4	84%	58%	14%
7	ATLANTA	PCT	111	54.2	94%	62%	41%
7	AUGUSTA	PCT	39	57.9	82%	74%	33%
7	BIRMINGHAM	PCT	160	56.3	94%	72%	63%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	53.3	94%	61%	26%
7	CHARLESTON	PCT	147	54.8	95%	65%	4%
7	DUBLIN	PCT	157	55.8	89%	74%	9%
8	BAY PINES	SUPT	252	57.5	92%	70%	9%
8	MIAMI	PCT	60	53.2	90%	58%	12%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	53.3	95%	77%	8%
8	SAN JUAN	PCT	41	48.6	93%	76%	20%
8	TAMPA	PCT	79	53.1	87%	70%	30%
9	HUNTINGTON	PCT	26	54.9	77%	77%	8%
9	LEXINGTON	PCT	44	57.0	75%	66%	11%
9	LOUISVILLE	PCT	41	54.3	93%	71%	29%
9	MEMPHIS	PCT	105	58.3	89%	59%	28%
9	MOUNTAIN HOME	PCT	160	56.5	83%	67%	33%
10	BRECKSVILLE	PCT	181	57.9	83%	67%	10%
10	BRECKSVILLE	WSDTT	18	41.8	100%	50%	11%
10	CHILLICOTHE	PCT	127	58.1	98%	74%	1%
10	CINCINNATI	PCT	111	53.8	86%	69%	7%
10	COLUMBUS	PCT	96	55.8	94%	74%	17%
10	DAYTON	PCT	122	52.8	92%	64%	30%
11	ANN ARBOR HCS	PCT	137	54.2	89%	67%	8%
11	BATTLE CREEK	PCT	48	56.0	92%	74%	6%
11	DANVILLE	PCT	108	57.9	91%	73%	20%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	53.9	95%	77%	10%
11	NORTHERN IN HCS: Marion	PCT	10	54.7	80%	70%	10%



Table 2-6. Sociodemographic Background and Social Functioning Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Age	High School Education Or More	Not Working	Violent Behavior
12	CHICAGO HCS: West Side	PCT	139	54.2	87%	79%	17%
12	HINES	PCT	53	57.5	83%	64%	34%
12	MADISON	WSDTT	29	40.1	100%	48%	10%
15	EASTERN KS HCS: Topeka	PCT	53	54.4	98%	70%	26%
15	KANSAS CITY	PCT	264	56.3	86%	56%	32%
15	POPLAR BLUFF	PCT	52	56.6	85%	77%	17%
15	ST. LOUIS	PCT	166	56.2	89%	66%	10%
15	WICHITA	PCT	80	56.3	84%	78%	12%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	56.5	83%	86%	10%
16	FAYETTEVILLE AR	PCT	138	56.6	87%	57%	32%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	56.7	89%	77%	25%
16	HOUSTON	PCT	454	54.5	89%	61%	14%
16	JACKSON	PCT	75	56.5	91%	77%	8%
16	MUSKOGEE	PCT	444	56.7	98%	77%	11%
16	NEW ORLEANS	PCT	129	56.7	81%	67%	10%
16	NEW ORLEANS	WSDTT	25	37.3	100%	68%	8%
16	OKLAHOMA CITY	PCT	18	56.4	100%	47%	12%
16	SHREVEPORT	PCT	30	56.2	100%	73%	27%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	54.5	91%	64%	15%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	54.4	91%	67%	3%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	55.4	90%	52%	21%
17	NORTH TX HCS: Dallas	PCT	181	55.9	91%	62%	19%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	55.3	89%	54%	19%
18	EL PASO VETERANS HCS	PCT	105	57.2	90%	63%	35%
18	NEW MEXICO HCS: Albuquerque	PCT	173	55.8	93%	75%	8%
18	PHOENIX	PCT	231	57.5	95%	65%	10%
18	SOUTHERN AZ HCS: Tucson	PCT	140	57.0	90%	70%	26%
19	CHEYENNE	PCT	66	49.9	97%	74%	41%
19	GRAND JUNCTION	PCT	57	53.7	96%	71%	14%
19	SALT LAKE CITY HCS	PCT	33	50.0	94%	56%	30%
20	BOISE	PCT	86	53.0	87%	62%	20%
20	PORTLAND	PCT	336	53.9	93%	74%	31%
20	PUGET SOUND HCS: American Lake	PCT	292	49.3	98%	64%	14%
20	PUGET SOUND HCS: Seattle	PCT	172	51.1	98%	69%	10%
20	SPOKANE	PCT	134	55.4	94%	74%	20%
21	HONOLULU	PCT	23	59.6	100%	65%	4%
21	NORTHERN CA HCS	PCT	120	58.0	93%	67%	2%
21	PALO ALTO HCS: San Jose	PCT	40	56.9	95%	65%	3%
21	SAN FRANCISCO	PCT	151	56.2	95%	74%	10%
21	SAN FRANCISCO	SUPT	31	55.2	90%	90%	33%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	62.4	69%	76%	38%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	52.9	90%	82%	29%
22	LOMA LINDA	PCT	67	54.9	91%	76%	24%
22	LOMA LINDA	WSDTT	32	41.9	97%	75%	9%
22	SAN DIEGO HCS CA	PCT	196	55.1	93%	60%	33%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	54.1	98%	62%	43%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	52.6	96%	66%	15%
23	CENTRAL IA HCS: Knoxville	PCT	105	55.4	98%	66%	15%
23	IOWA CITY	PCT	223	53.0	92%	55%	10%
23	MINNEAPOLIS	PCT	195	55.8	90%	56%	7%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	54.0	99%	63%	5%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	52.8	94%	66%	10%
TOTAL			12,998				
MEAN			123	54.3	91%	68%	19%
S.D.			95	3.8	6%	9%	13%

Table 2-7. Critical Monitors: Summary of Outliers for Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	# of Progs.	War Zone Service*	PTSD Clinical Diagnosis	Subs. Abuse Dx	Valid. by DD214	Prior Psych. Tx	Prior Spec. PTSD Tx	Total # of Outliers	Mean # Outliers/ Program
1	7	2	1		3	1	1	8	1.1
2	3	1		1				2	0.7
3	5				2		2	4	0.8
4	4		2			1	3	6	1.5
5	3	2	1		1	1	1	6	2.0
6	5			3		1	1	5	1.0
7	6		1	1	2	2	1	7	1.2
8	5		1	1	2	1		5	1.0
9	5			2	1			3	0.6
10	6			3			1	4	0.7
11	5	1	1		1	1	1	5	1.0
12	3		1		1		1	3	1.0
15	5		1	1		1	1	4	0.8
16	10		3	2	2	3	3	13	1.3
17	5				2	1		3	0.6
18	4		1		1		1	3	0.8
19	3	2		1		2	1	6	2.0
20	5	4	2		1		1	8	1.6
21	5					1	1	2	0.4
22	6		1	1	1	1		4	0.7
23	6	1	1					2	0.3
TOTAL	106	13	17	16	20	17	20	103	1.0
MEAN									0.5
S.D.									0.5

Boxed cell signifies an outlier in the undesirable direction.

\*Data for WSDTTs were excluded from these calculations for War Zone Service. WSDTTs were not counted as outliers for this monitor.

Table 2-8. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Male	Married	Separated or Divorced	Never Married
1	510	79%	43%	37%	17%
2	237	93%	59%	28%	10%
3	455	97%	49%	35%	11%
4	270	97%	58%	32%	6%
5	699	93%	46%	37%	14%
6	753	97%	65%	27%	6%
7	718	98%	62%	30%	5%
8	586	97%	57%	33%	8%
9	376	97%	71%	22%	3%
10	655	94%	61%	30%	6%
11	428	96%	59%	31%	7%
12	221	87%	38%	39%	20%
15	615	99%	66%	25%	7%
16	1,535	96%	65%	27%	6%
17	1,225	97%	62%	31%	4%
18	649	96%	66%	27%	5%
19	156	88%	49%	40%	8%
20	1,020	90%	56%	34%	7%
21	365	98%	49%	38%	10%
22	727	95%	50%	34%	12%
23	798	93%	59%	29%	10%
TOTAL	12,998				
MEAN	619	94%	57%	32%	9%
S.D	338	5%	9%	5%	4%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
1	BOSTON HCS: Boston	PCT	96	100%	48%	35%	16%
1	BOSTON HCS: Boston	WSDTT	88	0%	17%	53%	26%
1	BOSTON HCS: Brockton	PCT	35	100%	50%	26%	15%
1	CONNECTICUT HCS: West Haven	PCT	145	97%	52%	29%	17%
1	CONNECTICUT HCS: West Haven	SUPT	50	96%	29%	57%	12%
1	PROVIDENCE	PCT	47	94%	64%	23%	9%
1	WHITE RIVER JUNCTION	PCT	49	80%	47%	35%	18%
2	CANANDAIGUA	PCT	119	96%	55%	30%	11%
2	SYRACUSE	PCT	68	85%	58%	30%	10%
2	WESTERN NY HCS: Batavia	PCT	50	98%	70%	18%	6%
3	BRONX	PCT	8	100%	63%	13%	25%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	90%	30%	55%	15%
3	NEW JERSEY HCS: East Orange	PCT	83	98%	57%	29%	6%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	96%	53%	33%	10%
3	NEW YORK HARBOR HCS: New York	PCT	94	99%	34%	43%	16%
4	COATESVILLE	PCT	72	100%	72%	21%	7%
4	PHILADELPHIA	PCT	129	94%	52%	40%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	41	100%	78%	7%	5%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	100%	21%	57%	18%
5	MARYLAND HCS: Baltimore	PCT	226	91%	43%	36%	18%
5	MARYLAND HCS: Perry Point	PCT	155	89%	39%	45%	13%
5	WASHINGTON DC	PCT	318	96%	52%	34%	11%
6	ASHEVILLE	PCT	50	98%	74%	18%	4%
6	DURHAM	PCT	148	97%	64%	27%	5%
6	FAYETTEVILLE NC	PCT	55	96%	82%	15%	4%
6	HAMPTON	PCT	251	97%	59%	31%	8%
6	SALISBURY	PCT	249	98%	65%	27%	5%
7	ATLANTA	PCT	111	98%	56%	40%	4%
7	AUGUSTA	PCT	39	92%	69%	21%	3%
7	BIRMINGHAM	PCT	160	98%	68%	25%	5%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	98%	59%	32%	7%
7	CHARLESTON	PCT	147	97%	63%	26%	5%
7	DUBLIN	PCT	157	99%	60%	32%	5%
8	BAY PINES	SUPT	252	100%	52%	37%	8%
8	MIAMI	PCT	60	93%	47%	41%	12%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	98%	62%	31%	5%
8	SAN JUAN	PCT	41	98%	63%	17%	17%
8	TAMPA	PCT	79	89%	66%	25%	8%
9	HUNTINGTON	PCT	26	100%	81%	15%	4%
9	LEXINGTON	PCT	44	100%	84%	14%	2%
9	LOUISVILLE	PCT	41	95%	66%	27%	2%
9	MEMPHIS	PCT	105	99%	67%	23%	6%
9	MOUNTAIN HOME	PCT	160	96%	71%	23%	2%
10	BRECKSVILLE	PCT	181	100%	69%	25%	4%
10	BRECKSVILLE	WSDTT	18	0%	33%	50%	17%
10	CHILLICOTHE	PCT	127	97%	62%	26%	7%
10	CINCINNATI	PCT	111	88%	61%	24%	10%
10	COLUMBUS	PCT	96	100%	54%	36%	6%
10	DAYTON	PCT	122	94%	56%	37%	5%
11	ANN ARBOR HCS	PCT	137	98%	57%	31%	9%
11	BATTLE CREEK	PCT	48	100%	58%	31%	6%
11	DANVILLE	PCT	108	96%	64%	26%	6%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	93%	55%	38%	6%
11	NORTHERN IN HCS: Marion	PCT	10	100%	70%	20%	10%

Table 2-9. Gender and Marital Status Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Male	Married	Separated or Divorced	Never Married
12	CHICAGO HCS: West Side	PCT	139	100%	31%	46%	18%
12	HINES	PCT	53	100%	58%	30%	11%
12	MADISON	WSDTT	29	3%	31%	24%	41%
15	EASTERN KS HCS: Topeka	PCT	53	98%	64%	30%	6%
15	KANSAS CITY	PCT	264	99%	65%	25%	8%
15	POPLAR BLUFF	PCT	52	100%	85%	13%	0%
15	ST. LOUIS	PCT	166	99%	68%	23%	5%
15	WICHITA	PCT	80	100%	57%	30%	10%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	100%	50%	38%	11%
16	FAYETTEVILLE AR	PCT	138	98%	69%	24%	4%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	100%	65%	28%	5%
16	HOUSTON	PCT	454	96%	62%	27%	8%
16	JACKSON	PCT	75	91%	65%	27%	7%
16	MUSKOGEE	PCT	444	100%	73%	23%	2%
16	NEW ORLEANS	PCT	129	100%	56%	29%	9%
16	NEW ORLEANS	WSDTT	25	0%	28%	36%	32%
16	OKLAHOMA CITY	PCT	18	100%	61%	22%	6%
16	SHREVEPORT	PCT	30	100%	80%	20%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	96%	54%	38%	5%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	93%	56%	36%	4%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	100%	64%	32%	2%
17	NORTH TX HCS: Dallas	PCT	181	98%	63%	30%	5%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	97%	68%	25%	4%
18	EL PASO VETERANS HCS	PCT	105	96%	68%	27%	2%
18	NEW MEXICO HCS: Albuquerque	PCT	173	88%	61%	30%	8%
18	PHOENIX	PCT	231	100%	73%	20%	5%
18	SOUTHERN AZ HCS: Tucson	PCT	140	100%	59%	34%	4%
19	CHEYENNE	PCT	66	79%	48%	36%	12%
19	GRAND JUNCTION	PCT	57	93%	46%	46%	5%
19	SALT LAKE CITY HCS	PCT	33	100%	53%	34%	6%
20	BOISE	PCT	86	94%	67%	24%	7%
20	PORTLAND	PCT	336	96%	53%	37%	7%
20	PUGET SOUND HCS: American Lake	PCT	292	81%	63%	28%	8%
20	PUGET SOUND HCS: Seattle	PCT	172	87%	41%	44%	12%
20	SPOKANE	PCT	134	93%	63%	32%	1%
21	HONOLULU	PCT	23	100%	65%	17%	13%
21	NORTHERN CA HCS	PCT	120	100%	63%	32%	5%
21	PALO ALTO HCS: San Jose	PCT	40	100%	54%	36%	8%
21	SAN FRANCISCO	PCT	151	94%	42%	42%	13%
21	SAN FRANCISCO	SUPT	31	100%	16%	61%	19%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	100%	61%	28%	9%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	100%	27%	44%	20%
22	LOMA LINDA	PCT	67	100%	57%	34%	3%
22	LOMA LINDA	WSDTT	32	19%	28%	47%	25%
22	SAN DIEGO HCS CA	PCT	196	98%	49%	35%	13%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	97%	62%	28%	8%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	96%	51%	33%	14%
23	CENTRAL IA HCS: Knoxville	PCT	105	99%	65%	23%	9%
23	IOWA CITY	PCT	223	89%	55%	30%	14%
23	MINNEAPOLIS	PCT	195	95%	62%	29%	8%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	93%	72%	20%	7%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	90%	54%	35%	5%
TOTAL			12,998				
MEAN			123	92%	57%	31%	9%
S.D.			95	20%	14%	10%	7%

Table 2-10. Race/Ethnicity Among Veterans in Specialized  
Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Caucasian	African American	Hispanic	Other
1	510	79%	15%	3%	3%
2	237	75%	13%	1%	11%
3	455	45%	39%	14%	2%
4	270	66%	29%	4%	1%
5	699	30%	65%	2%	3%
6	753	57%	40%	2%	2%
7	718	44%	53%	1%	1%
8	586	71%	14%	15%	1%
9	376	84%	15%	0%	0%
10	655	82%	16%	1%	1%
11	428	86%	10%	1%	3%
12	221	38%	55%	5%	1%
15	615	81%	13%	3%	2%
16	1,535	64%	26%	5%	5%
17	1,225	46%	19%	33%	1%
18	649	59%	5%	33%	3%
19	156	89%	3%	6%	2%
20	1,020	78%	11%	4%	6%
21	365	68%	10%	9%	13%
22	727	52%	20%	17%	11%
23	798	89%	7%	2%	3%
TOTAL	12,998				
MEAN	619	66%	23%	8%	4%
S.D	338	18%	18%	10%	4%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
1	BOSTON HCS: Boston	PCT	96	83%	15%	2%	0%
1	BOSTON HCS: Boston	WSDTT	88	67%	19%	6%	8%
1	BOSTON HCS: Brockton	PCT	35	74%	14%	3%	9%
1	CONNECTICUT HCS: West Haven	PCT	145	83%	11%	6%	1%
1	CONNECTICUT HCS: West Haven	SUPT	50	54%	38%	0%	8%
1	PROVIDENCE	PCT	47	91%	9%	0%	0%
1	WHITE RIVER JUNCTION	PCT	49	98%	0%	0%	2%
2	CANANDAIGUA	PCT	119	78%	17%	3%	3%
2	SYRACUSE	PCT	68	54%	12%	0%	34%
2	WESTERN NY HCS: Batavia	PCT	50	96%	4%	0%	0%
3	BRONX	PCT	8	13%	63%	13%	13%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	80%	10%	10%	0%
3	NEW JERSEY HCS: East Orange	PCT	83	59%	37%	4%	0%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	48%	37%	14%	1%
3	NEW YORK HARBOR HCS: New York	PCT	94	22%	50%	24%	3%
4	COATESVILLE	PCT	72	86%	11%	3%	0%
4	PHILADELPHIA	PCT	129	43%	48%	6%	2%
4	PITTSBURGH HCS: Highland Drive	PCT	41	93%	5%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	79%	21%	0%	0%
5	MARYLAND HCS: Baltimore	PCT	226	37%	60%	1%	2%
5	MARYLAND HCS: Perry Point	PCT	155	51%	41%	4%	4%
5	WASHINGTON DC	PCT	318	15%	80%	2%	3%
6	ASHEVILLE	PCT	50	94%	6%	0%	0%
6	DURHAM	PCT	148	41%	55%	2%	3%
6	FAYETTEVILLE NC	PCT	55	27%	62%	4%	7%
6	HAMPTON	PCT	251	45%	50%	3%	2%
6	SALISBURY	PCT	249	76%	22%	0%	1%
7	ATLANTA	PCT	111	36%	59%	4%	1%
7	AUGUSTA	PCT	39	74%	23%	0%	3%
7	BIRMINGHAM	PCT	160	45%	54%	1%	0%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	35%	64%	0%	1%
7	CHARLESTON	PCT	147	43%	54%	1%	3%
7	DUBLIN	PCT	157	49%	46%	3%	2%
8	BAY PINES	SUPT	252	88%	8%	4%	0%
8	MIAMI	PCT	60	22%	47%	32%	0%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	80%	13%	5%	2%
8	SAN JUAN	PCT	41	0%	0%	100%	0%
8	TAMPA	PCT	79	71%	15%	11%	3%
9	HUNTINGTON	PCT	26	100%	0%	0%	0%
9	LEXINGTON	PCT	44	95%	5%	0%	0%
9	LOUISVILLE	PCT	41	93%	7%	0%	0%
9	MEMPHIS	PCT	105	56%	44%	0%	0%
9	MOUNTAIN HOME	PCT	160	94%	4%	1%	1%
10	BRECKSVILLE	PCT	181	81%	16%	3%	1%
10	BRECKSVILLE	WSDTT	18	56%	39%	6%	0%
10	CHILLICOTHE	PCT	127	98%	2%	0%	0%
10	CINCINNATI	PCT	111	76%	23%	2%	0%
10	COLUMBUS	PCT	96	79%	19%	0%	2%
10	DAYTON	PCT	122	80%	20%	0%	1%
11	ANN ARBOR HCS	PCT	137	86%	10%	1%	3%
11	BATTLE CREEK	PCT	48	77%	21%	2%	0%
11	DANVILLE	PCT	108	91%	7%	1%	1%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	83%	9%	2%	6%
11	NORTHERN IN HCS: Marion	PCT	10	90%	10%	0%	0%

Table 2-11. Race/Ethnicity Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Caucasian	African American	Hispanic	Other
12	CHICAGO HCS: West Side	PCT	139	17%	75%	6%	1%
12	HINES	PCT	53	79%	19%	2%	0%
12	MADISON	WSDTT	29	66%	24%	7%	3%
15	EASTERN KS HCS: Topeka	PCT	53	83%	9%	4%	4%
15	KANSAS CITY	PCT	264	79%	16%	3%	2%
15	POPLAR BLUFF	PCT	52	98%	2%	0%	0%
15	ST. LOUIS	PCT	166	77%	17%	2%	3%
15	WICHITA	PCT	80	88%	6%	6%	0%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	65%	28%	3%	4%
16	FAYETTEVILLE AR	PCT	138	93%	2%	3%	1%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	71%	25%	3%	1%
16	HOUSTON	PCT	454	43%	43%	12%	2%
16	JACKSON	PCT	75	59%	37%	0%	4%
16	MUSKOGEE	PCT	444	83%	6%	1%	11%
16	NEW ORLEANS	PCT	129	43%	53%	3%	2%
16	NEW ORLEANS	WSDTT	25	48%	48%	4%	0%
16	OKLAHOMA CITY	PCT	18	78%	6%	0%	17%
16	SHREVEPORT	PCT	30	70%	30%	0%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	53%	25%	19%	3%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	61%	26%	12%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	57%	31%	13%	0%
17	NORTH TX HCS: Dallas	PCT	181	64%	27%	8%	2%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	30%	8%	60%	1%
18	EL PASO VETERANS HCS	PCT	105	38%	5%	55%	2%
18	NEW MEXICO HCS: Albuquerque	PCT	173	40%	3%	51%	5%
18	PHOENIX	PCT	231	73%	7%	17%	3%
18	SOUTHERN AZ HCS: Tucson	PCT	140	74%	5%	19%	3%
19	CHEYENNE	PCT	66	86%	5%	5%	5%
19	GRAND JUNCTION	PCT	57	93%	0%	7%	0%
19	SALT LAKE CITY HCS	PCT	33	88%	3%	9%	0%
20	BOISE	PCT	86	94%	2%	3%	0%
20	PORTLAND	PCT	336	85%	4%	5%	6%
20	PUGET SOUND HCS: American Lake	PCT	292	64%	22%	6%	8%
20	PUGET SOUND HCS: Seattle	PCT	172	67%	20%	3%	10%
20	SPOKANE	PCT	134	95%	1%	1%	4%
21	HONOLULU	PCT	23	39%	4%	9%	48%
21	NORTHERN CA HCS	PCT	120	75%	12%	7%	7%
21	PALO ALTO HCS: San Jose	PCT	40	50%	5%	38%	8%
21	SAN FRANCISCO	PCT	151	73%	8%	5%	15%
21	SAN FRANCISCO	SUPT	31	58%	29%	6%	6%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	16%	17%	40%	27%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	38%	42%	13%	6%
22	LOMA LINDA	PCT	67	57%	19%	22%	1%
22	LOMA LINDA	WSDTT	32	69%	9%	6%	16%
22	SAN DIEGO HCS CA	PCT	196	55%	15%	18%	12%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	69%	15%	8%	8%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	78%	0%	0%	22%
23	CENTRAL IA HCS: Knoxville	PCT	105	89%	10%	1%	1%
23	IOWA CITY	PCT	223	93%	5%	1%	0%
23	MINNEAPOLIS	PCT	195	90%	5%	3%	2%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	94%	2%	2%	1%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	80%	16%	3%	1%
TOTAL			12,998				
MEAN			123	67%	21%	8%	4%
S.D.			95	23%	19%	14%	7%



Table 2-12. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	World War II	Korea	Vietnam	Persian Gulf
1	510	4%	3%	54%	23%
2	237	7%	3%	60%	16%
3	455	3%	5%	74%	14%
4	270	5%	2%	77%	11%
5	699	1%	2%	71%	16%
6	753	3%	3%	80%	14%
7	718	1%	3%	80%	15%
8	586	4%	5%	69%	18%
9	376	5%	5%	78%	12%
10	655	5%	6%	69%	15%
11	428	7%	3%	71%	13%
12	221	1%	0%	75%	14%
15	615	4%	5%	79%	10%
16	1,535	3%	3%	80%	12%
17	1,225	2%	3%	78%	14%
18	649	6%	6%	73%	14%
19	156	3%	3%	63%	19%
20	1,020	1%	2%	65%	19%
21	365	5%	7%	77%	8%
22	727	6%	5%	68%	20%
23	798	7%	4%	66%	18%
TOTAL	12,998				
MEAN	619	4%	4%	72%	15%
S.D	338	2%	2%	7%	4%

Table 2-12A. Military Service Within the Persian Gulf Era Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Afghanistan*	Iraq*	Peace-keeping Operation*
1	187	3%	12%	3%
2	82	2%	6%	4%
3	48	4%	21%	8%
4	84	1%	8%	2%
5	501	0%	7%	6%
6	293	0%	3%	4%
7	277	1%	1%	1%
8	189	2%	20%	6%
9	96	6%	4%	0%
10	124	2%	7%	2%
11	198	0%	10%	2%
12	83	0%	4%	4%
15	168	1%	4%	4%
16	532	1%	4%	3%
17	366	1%	4%	4%
18	144	2%	4%	6%
19	39	5%	5%	3%
20	460	0%	5%	3%
21	67	0%	7%	3%
22	285	3%	20%	5%
23	204	1%	13%	2%
TOTAL	4,427			
MEAN	211	2%	8%	3%
S.D	149	2%	6%	2%

\*These items were added to the evaluation form in May, 2004.

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
1	BOSTON HCS: Boston	PCT	96	4%	2%	63%	18%
1	BOSTON HCS: Boston	WSDTT	88	0%	3%	17%	43%
1	BOSTON HCS: Brockton	PCT	35	3%	3%	71%	14%
1	CONNECTICUT HCS: West Haven	PCT	145	3%	4%	61%	22%
1	CONNECTICUT HCS: West Haven	SUPT	50	0%	0%	80%	8%
1	PROVIDENCE	PCT	47	17%	2%	55%	19%
1	WHITE RIVER JUNCTION	PCT	49	2%	0%	41%	29%
2	CANANDAIGUA	PCT	119	8%	5%	59%	13%
2	SYRACUSE	PCT	68	1%	1%	60%	25%
2	WESTERN NY HCS: Batavia	PCT	50	12%	2%	64%	14%
3	BRONX	PCT	8	0%	0%	88%	13%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	5%	0%	85%	15%
3	NEW JERSEY HCS: East Orange	PCT	83	13%	4%	70%	5%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	0%	6%	78%	14%
3	NEW YORK HARBOR HCS: New York	PCT	94	1%	5%	62%	22%
4	COATESVILLE	PCT	72	6%	1%	81%	8%
4	PHILADELPHIA	PCT	129	6%	2%	74%	11%
4	PITTSBURGH HCS: Highland Drive	PCT	41	5%	7%	73%	15%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	0%	0%	82%	11%
5	MARYLAND HCS: Baltimore	PCT	226	1%	2%	68%	14%
5	MARYLAND HCS: Perry Point	PCT	155	1%	0%	57%	16%
5	WASHINGTON DC	PCT	318	1%	3%	81%	17%
6	ASHEVILLE	PCT	50	6%	2%	84%	10%
6	DURHAM	PCT	148	2%	1%	78%	13%
6	FAYETTEVILLE NC	PCT	55	2%	7%	76%	31%
6	HAMPTON	PCT	251	2%	3%	76%	16%
6	SALISBURY	PCT	249	3%	3%	85%	8%
7	ATLANTA	PCT	111	2%	2%	79%	22%
7	AUGUSTA	PCT	39	3%	8%	79%	13%
7	BIRMINGHAM	PCT	160	0%	4%	85%	11%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	4%	4%	60%	27%
7	CHARLESTON	PCT	147	1%	2%	84%	14%
7	DUBLIN	PCT	157	1%	1%	85%	9%
8	BAY PINES	SUPT	252	5%	7%	79%	7%
8	MIAMI	PCT	60	2%	2%	60%	22%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	2%	4%	69%	23%
8	SAN JUAN	PCT	41	2%	5%	54%	44%
8	TAMPA	PCT	79	6%	5%	49%	27%
9	HUNTINGTON	PCT	26	4%	8%	81%	8%
9	LEXINGTON	PCT	44	5%	7%	77%	11%
9	LOUISVILLE	PCT	41	0%	2%	71%	20%
9	MEMPHIS	PCT	105	8%	6%	74%	10%
9	MOUNTAIN HOME	PCT	160	4%	5%	81%	13%
10	BRECKSVILLE	PCT	181	10%	12%	62%	14%
10	BRECKSVILLE	WSDTT	18	0%	0%	11%	61%
10	CHILLICOTHE	PCT	127	10%	6%	72%	10%
10	CINCINNATI	PCT	111	2%	3%	73%	14%
10	COLUMBUS	PCT	96	2%	4%	86%	10%
10	DAYTON	PCT	122	1%	2%	69%	19%
11	ANN ARBOR HCS	PCT	137	4%	3%	69%	15%
11	BATTLE CREEK	PCT	48	4%	2%	83%	8%
11	DANVILLE	PCT	108	14%	5%	69%	10%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	5%	2%	70%	16%
11	NORTHERN IN HCS: Marion	PCT	10	0%	10%	50%	10%

Table 2-13. War-Time Service Eras Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	World War II	Korea	Vietnam	Persian Gulf
12	CHICAGO HCS: West Side	PCT	139	0%	0%	86%	8%
12	HINES	PCT	53	6%	2%	87%	4%
12	MADISON	WSDTT	29	0%	0%	3%	59%
15	EASTERN KS HCS: Topeka	PCT	53	6%	4%	72%	17%
15	KANSAS CITY	PCT	264	4%	6%	77%	9%
15	POPLAR BLUFF	PCT	52	0%	6%	90%	6%
15	ST. LOUIS	PCT	166	4%	4%	80%	11%
15	WICHITA	PCT	80	3%	5%	79%	13%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	2%	6%	88%	8%
16	FAYETTEVILLE AR	PCT	138	7%	7%	65%	14%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	1%	4%	80%	13%
16	HOUSTON	PCT	454	1%	1%	81%	13%
16	JACKSON	PCT	75	8%	3%	76%	13%
16	MUSKOGEE	PCT	444	4%	3%	86%	7%
16	NEW ORLEANS	PCT	129	5%	6%	78%	12%
16	NEW ORLEANS	WSDTT	25	0%	0%	8%	80%
16	OKLAHOMA CITY	PCT	18	6%	6%	89%	6%
16	SHREVEPORT	PCT	30	0%	0%	97%	3%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	2%	3%	75%	13%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	2%	3%	73%	19%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	1%	2%	84%	13%
17	NORTH TX HCS: Dallas	PCT	181	6%	4%	78%	13%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	2%	3%	80%	13%
18	EL PASO VETERANS HCS	PCT	105	5%	10%	80%	12%
18	NEW MEXICO HCS: Albuquerque	PCT	173	8%	6%	61%	20%
18	PHOENIX	PCT	231	6%	7%	75%	13%
18	SOUTHERN AZ HCS: Tucson	PCT	140	4%	4%	77%	12%
19	CHEYENNE	PCT	66	3%	3%	52%	26%
19	GRAND JUNCTION	PCT	57	4%	4%	72%	9%
19	SALT LAKE CITY HCS	PCT	33	0%	0%	73%	24%
20	BOISE	PCT	86	5%	0%	56%	12%
20	PORTLAND	PCT	336	1%	2%	76%	11%
20	PUGET SOUND HCS: American Lake	PCT	292	1%	1%	54%	34%
20	PUGET SOUND HCS: Seattle	PCT	172	0%	2%	63%	20%
20	SPOKANE	PCT	134	4%	7%	68%	12%
21	HONOLULU	PCT	23	4%	13%	78%	4%
21	NORTHERN CA HCS	PCT	120	3%	9%	85%	6%
21	PALO ALTO HCS: San Jose	PCT	40	5%	3%	78%	5%
21	SAN FRANCISCO	PCT	151	8%	6%	68%	13%
21	SAN FRANCISCO	SUPT	31	0%	0%	90%	6%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	18%	9%	72%	2%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	5%	4%	61%	19%
22	LOMA LINDA	PCT	67	1%	4%	82%	13%
22	LOMA LINDA	WSDTT	32	0%	0%	31%	44%
22	SAN DIEGO HCS CA	PCT	196	6%	7%	65%	26%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	5%	3%	73%	21%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	4%	4%	65%	23%
23	CENTRAL IA HCS: Knoxville	PCT	105	10%	6%	60%	18%
23	IOWA CITY	PCT	223	8%	2%	65%	21%
23	MINNEAPOLIS	PCT	195	5%	4%	73%	11%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	10%	6%	63%	17%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	4%	4%	64%	25%
TOTAL			12,998				
MEAN			123	4%	4%	70%	17%
S.D.			95	4%	3%	16%	12%

Table 2-13A. Military Service Within the Persian Gulf Era Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Afghanistan*	Iraq*	Peace-keeping Operation*
1	BOSTON HCS: Boston	PCT	44	2%	16%	7%
1	BOSTON HCS: Boston	WSDTT	36	3%	3%	0%
1	BOSTON HCS: Brockton	PCT	0			
1	CONNECTICUT HCS: West Haven	PCT	59	5%	14%	2%
1	CONNECTICUT HCS: West Haven	SUPT	15	0%	7%	7%
1	PROVIDENCE	PCT	15	0%	13%	0%
1	WHITE RIVER JUNCTION	PCT	18	0%	22%	6%
2	CANANDAIGUA	PCT	66	3%	8%	0%
2	SYRACUSE	PCT	14	0%	0%	21%
2	WESTERN NY HCS: Batavia	PCT	2	0%	0%	0%
3	BRONX	PCT	0			
3	HUDSON VALLEY HCS: Castle Point	PCT	0			
3	NEW JERSEY HCS: East Orange	PCT	0			
3	NEW YORK HARBOR HCS: Brooklyn	PCT	24	0%	17%	4%
3	NEW YORK HARBOR HCS: New York	PCT	24	8%	25%	13%
4	COATESVILLE	PCT	20	0%	5%	5%
4	PHILADELPHIA	PCT	36	0%	0%	0%
4	PITTSBURGH HCS: Highland Drive	PCT	16	6%	38%	6%
4	PITTSBURGH HCS: Highland Drive	SUPT	12	0%	0%	0%
5	MARYLAND HCS: Baltimore	PCT	154	1%	2%	7%
5	MARYLAND HCS: Perry Point	PCT	153	1%	7%	10%
5	WASHINGTON DC	PCT	194	0%	10%	1%
6	ASHEVILLE	PCT	45	0%	9%	2%
6	DURHAM	PCT	118	0%	0%	0%
6	FAYETTEVILLE NC	PCT	0			
6	HAMPTON	PCT	69	0%	4%	9%
6	SALISBURY	PCT	61	0%	5%	8%
7	ATLANTA	PCT	31	3%	0%	0%
7	AUGUSTA	PCT	24	0%	0%	0%
7	BIRMINGHAM	PCT	126	2%	2%	1%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	0			
7	CHARLESTON	PCT	37	0%	0%	3%
7	DUBLIN	PCT	59	0%	3%	0%
8	BAY PINES	PCT	61	0%	7%	5%
8	MIAMI	PCT	33	6%	21%	15%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	69	1%	28%	1%
8	SAN JUAN	PCT	7	14%	29%	14%
8	TAMPA	PCT	19	0%	26%	5%
9	HUNTINGTON	PCT	0			
9	LEXINGTON	PCT	4	0%	0%	0%
9	LOUISVILLE	PCT	19	16%	0%	0%
9	MEMPHIS	PCT	20	10%	20%	0%
9	MOUNTAIN HOME	PCT	53	2%	0%	0%
10	BRECKSVILLE	PCT	31	3%	16%	6%
10	BRECKSVILLE	WSDTT	6	0%	0%	0%
10	CHILLICOTHE	PCT	20	0%	5%	0%
10	CINCINNATI	PCT	23	4%	0%	0%
10	COLUMBUS	PCT	5	0%	0%	0%
10	DAYTON	PCT	39	0%	8%	0%
11	ANN ARBOR HCS	PCT	68	0%	9%	3%
11	BATTLE CREEK	PCT	11	0%	9%	9%
11	DANVILLE	PCT	62	0%	6%	0%
11	NORTHERN IN HCS: Fort Wayne	PCT	57	0%	14%	2%
11	NORTHERN IN HCS: Marion	PCT	0			

Table 2-13A. Military Service Within the Persian Gulf Era Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Afghanistan*	Iraq*	Peace-keeping Operation*
12	CHICAGO HCS: West Side	PCT	36	0%	6%	0%
12	HINES	PCT	33	0%	0%	6%
12	MADISON	WSDTT	14	0%	7%	7%
15	EASTERN KS HCS: Topeka	PCT	15	0%	0%	7%
15	KANSAS CITY	PCT	37	0%	11%	0%
15	POPLAR BLUFF	PCT	42	0%	0%	2%
15	ST. LOUIS	PCT	43	0%	7%	9%
15	WICHITA	PCT	31	3%	0%	0%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	108	0%	0%	3%
16	FAYETTEVILLE AR	PCT	55	0%	7%	2%
16	GULF COAST VETERANS HCS: Biloxi	PCT	44	2%	9%	14%
16	HOUSTON	PCT	213	0%	2%	1%
16	JACKSON	PCT	23	0%	9%	13%
16	MUSKOGEE	PCT	36	0%	6%	3%
16	NEW ORLEANS	PCT	41	5%	2%	0%
16	NEW ORLEANS	WSDTT	3	0%	100%	0%
16	OKLAHOMA CITY	PCT	0			
16	SHREVEPORT	PCT	9	0%	0%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	62	0%	5%	6%
17	CENTRAL TX VETERANS HCS: Temple	PCT	5	0%	0%	0%
17	CENTRAL TX VETERANS HCS: Waco	PCT	11	0%	0%	0%
17	NORTH TX HCS: Dallas	PCT	38	3%	3%	3%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	250	1%	5%	4%
18	EL PASO VETERANS HCS	PCT	41	0%	5%	5%
18	NEW MEXICO HCS: Albuquerque	PCT	24	0%	4%	4%
18	PHOENIX	PCT	48	0%	4%	4%
18	SOUTHERN AZ HCS: Tucson	PCT	31	10%	3%	10%
19	CHEYENNE	PCT	13	0%	8%	8%
19	GRAND JUNCTION	PCT	0			
19	SALT LAKE CITY HCS	PCT	26	8%	4%	0%
20	BOISE	PCT	29	0%	0%	3%
20	PORTLAND	PCT	76	1%	1%	1%
20	PUGET SOUND HCS: American Lake	PCT	164	0%	5%	4%
20	PUGET SOUND HCS: Seattle	PCT	150	0%	6%	1%
20	SPOKANE	PCT	41	0%	7%	5%
21	HONOLULU	PCT	9	0%	0%	11%
21	NORTHERN CA HCS	PCT	0			
21	PALO ALTO HCS: San Jose	PCT	10	0%	0%	0%
21	SAN FRANCISCO	PCT	43	0%	12%	2%
21	SAN FRANCISCO	SUPT	5	0%	0%	0%
22	GREATER LOS ANGELES HCS: East LA	PCT	40	0%	0%	0%
22	GREATER LOS ANGELES HCS: West LA	PCT	26	0%	23%	0%
22	LOMA LINDA	PCT	40	0%	20%	0%
22	LOMA LINDA	WSDTT	20	0%	25%	0%
22	SAN DIEGO HCS CA	PCT	65	0%	22%	5%
22	SOUTHERN NV HCS: Las Vegas	PCT	94	10%	26%	11%
23	BLACK HILLS HCS: Fort Meade	SUPT	12	0%	8%	8%
23	CENTRAL IA HCS: Knoxville	PCT	33	3%	6%	0%
23	IOWA CITY	PCT	65	0%	23%	0%
23	MINNEAPOLIS	PCT	49	2%	2%	2%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	15	0%	27%	7%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	30	0%	10%	7%
TOTAL			4,427			
MEAN			42	1%	9%	4%
S.D.			46	3%	13%	4%

Table 2-14. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	510	63%	4%	1%	49%
2	237	77%	5%	3%	61%
3	455	90%	2%	3%	53%
4	270	83%	5%	1%	70%
5	699	77%	9%	3%	50%
6	753	89%	9%	2%	67%
7	718	87%	7%	1%	64%
8	586	81%	8%	1%	61%
9	376	91%	5%	3%	58%
10	655	89%	4%	2%	51%
11	428	82%	4%	4%	60%
12	221	81%	8%	1%	63%
15	615	89%	14%	1%	56%
16	1,535	90%	4%	1%	69%
17	1,225	85%	14%	1%	67%
18	649	85%	6%	4%	64%
19	156	67%	6%	2%	63%
20	1,020	69%	6%	1%	60%
21	365	90%	9%	2%	63%
22	727	87%	8%	1%	53%
23	798	80%	5%	2%	62%
TOTAL	12,998				
MEAN	619	82%	7%	2%	60%
S.D	338	8%	3%	1%	6%

Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
1	BOSTON HCS: Boston	PCT	96	58%	7%	0%	57%
1	BOSTON HCS: Boston	WSDTT	88	16%	0%	0%	38%
1	BOSTON HCS: Brockton	PCT	35	86%	3%	6%	49%
1	CONNECTICUT HCS: West Haven	PCT	145	79%	2%	2%	47%
1	CONNECTICUT HCS: West Haven	SUPT	50	80%	12%	0%	48%
1	PROVIDENCE	PCT	47	81%	2%	0%	51%
1	WHITE RIVER JUNCTION	PCT	49	55%	2%	0%	57%
2	CANANDAIGUA	PCT	119	82%	7%	2%	51%
2	SYRACUSE	PCT	68	68%	3%	3%	71%
2	WESTERN NY HCS: Batavia	PCT	50	78%	6%	4%	70%
3	BRONX	PCT	8	88%	0%	13%	75%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	90%	15%	10%	70%
3	NEW JERSEY HCS: East Orange	PCT	83	94%	0%	2%	52%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	91%	0%	2%	53%
3	NEW YORK HARBOR HCS: New York	PCT	94	86%	6%	2%	50%
4	COATESVILLE	PCT	72	85%	4%	0%	71%
4	PHILADELPHIA	PCT	129	78%	1%	2%	76%
4	PITTSBURGH HCS: Highland Drive	PCT	41	93%	22%	0%	54%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	86%	0%	0%	61%
5	MARYLAND HCS: Baltimore	PCT	226	68%	8%	6%	52%
5	MARYLAND HCS: Perry Point	PCT	155	55%	6%	1%	44%
5	WASHINGTON DC	PCT	318	93%	11%	1%	51%
6	ASHEVILLE	PCT	50	100%	6%	0%	92%
6	DURHAM	PCT	148	86%	0%	1%	80%
6	FAYETTEVILLE NC	PCT	55	96%	0%	0%	100%
6	HAMPTON	PCT	251	83%	17%	5%	59%
6	SALISBURY	PCT	249	92%	8%	1%	54%
7	ATLANTA	PCT	111	84%	7%	1%	62%
7	AUGUSTA	PCT	39	92%	8%	3%	62%
7	BIRMINGHAM	PCT	160	90%	12%	0%	78%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	85%	5%	0%	63%
7	CHARLESTON	PCT	147	78%	0%	2%	57%
7	DUBLIN	PCT	157	97%	8%	0%	60%
8	BAY PINES	SUPT	252	79%	4%	1%	63%
8	MIAMI	PCT	60	78%	5%	3%	63%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	84%	16%	0%	60%
8	SAN JUAN	PCT	41	93%	15%	0%	54%
8	TAMPA	PCT	79	75%	3%	3%	54%
9	HUNTINGTON	PCT	26	100%	0%	0%	62%
9	LEXINGTON	PCT	44	98%	0%	0%	57%
9	LOUISVILLE	PCT	41	83%	5%	12%	66%
9	MEMPHIS	PCT	105	96%	3%	3%	55%
9	MOUNTAIN HOME	PCT	160	88%	8%	1%	58%
10	BRECKSVILLE	PCT	181	96%	9%	2%	50%
10	BRECKSVILLE	WSDTT	18	28%	0%	0%	50%
10	CHILLICOTHE	PCT	127	94%	2%	1%	57%
10	CINCINNATI	PCT	111	77%	3%	3%	59%
10	COLUMBUS	PCT	96	98%	1%	2%	43%
10	DAYTON	PCT	122	85%	4%	1%	49%
11	ANN ARBOR HCS	PCT	137	75%	7%	1%	53%
11	BATTLE CREEK	PCT	48	92%	2%	0%	52%
11	DANVILLE	PCT	108	91%	2%	11%	61%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	78%	2%	2%	70%
11	NORTHERN IN HCS: Marion	PCT	10	80%	10%	0%	80%



Table 2-15. Traumatic Exposure and Service Connection Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Exposed to Enemy/ Friendly Fire	Participated In Atrocities	Prisoner of War	Service Connected
12	CHICAGO HCS: West Side	PCT	139	88%	7%	1%	67%
12	HINES	PCT	53	98%	13%	2%	55%
12	MADISON	WSDTT	29	10%	0%	0%	62%
15	EASTERN KS HCS: Topeka	PCT	53	87%	9%	0%	51%
15	KANSAS CITY	PCT	264	86%	15%	1%	47%
15	POPLAR BLUFF	PCT	52	94%	10%	0%	83%
15	ST. LOUIS	PCT	166	92%	21%	4%	70%
15	WICHITA	PCT	80	86%	5%	0%	40%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	92%	13%	1%	70%
16	FAYETTEVILLE AR	PCT	138	81%	1%	0%	57%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	94%	5%	6%	72%
16	HOUSTON	PCT	454	85%	4%	1%	60%
16	JACKSON	PCT	75	88%	5%	3%	93%
16	MUSKOGEE	PCT	444	98%	0%	0%	82%
16	NEW ORLEANS	PCT	129	91%	4%	1%	56%
16	NEW ORLEANS	WSDTT	25	32%	0%	0%	48%
16	OKLAHOMA CITY	PCT	18	94%	11%	11%	50%
16	SHREVEPORT	PCT	30	93%	20%	0%	83%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	77%	0%	2%	58%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	83%	6%	1%	70%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	90%	10%	1%	70%
17	NORTH TX HCS: Dallas	PCT	181	86%	0%	1%	56%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	89%	30%	0%	74%
18	EL PASO VETERANS HCS	PCT	105	92%	10%	0%	64%
18	NEW MEXICO HCS: Albuquerque	PCT	173	78%	9%	3%	82%
18	PHOENIX	PCT	231	93%	0%	4%	52%
18	SOUTHERN AZ HCS: Tucson	PCT	140	76%	9%	7%	61%
19	CHEYENNE	PCT	66	61%	3%	2%	73%
19	GRAND JUNCTION	PCT	57	65%	4%	2%	67%
19	SALT LAKE CITY HCS	PCT	33	85%	15%	3%	39%
20	BOISE	PCT	86	48%	0%	0%	58%
20	PORTLAND	PCT	336	66%	10%	1%	55%
20	PUGET SOUND HCS: American Lake	PCT	292	70%	4%	2%	64%
20	PUGET SOUND HCS: Seattle	PCT	172	72%	4%	1%	55%
20	SPOKANE	PCT	134	85%	4%	3%	67%
21	HONOLULU	PCT	23	91%	4%	0%	78%
21	NORTHERN CA HCS	PCT	120	92%	11%	2%	66%
21	PALO ALTO HCS: San Jose	PCT	40	85%	5%	3%	25%
21	SAN FRANCISCO	PCT	151	88%	7%	3%	70%
21	SAN FRANCISCO	SUPT	31	94%	19%	0%	61%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	95%	15%	0%	56%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	88%	10%	2%	39%
22	LOMA LINDA	PCT	67	97%	19%	1%	69%
22	LOMA LINDA	WSDTT	32	6%	3%	0%	63%
22	SAN DIEGO HCS CA	PCT	196	83%	10%	1%	62%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	94%	1%	2%	45%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	73%	4%	4%	71%
23	CENTRAL IA HCS: Knoxville	PCT	105	79%	4%	1%	60%
23	IOWA CITY	PCT	223	76%	2%	2%	52%
23	MINNEAPOLIS	PCT	195	89%	5%	2%	66%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	80%	1%	1%	61%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	75%	13%	3%	69%
TOTAL			12,998				
MEAN			123	81%	6%	2%	61%
S.D.			95	18%	6%	3%	12%

Table 2-16. Psychotropic Medications and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Disorder
1	510	52%	57%	8%	9%
2	237	73%	38%	6%	8%
3	455	34%	29%	2%	7%
4	270	73%	25%	5%	5%
5	699	62%	45%	11%	10%
6	753	67%	32%	3%	3%
7	718	76%	33%	4%	4%
8	586	69%	41%	9%	7%
9	376	81%	50%	5%	5%
10	655	58%	40%	7%	7%
11	428	64%	53%	8%	11%
12	221	67%	30%	8%	20%
15	615	60%	22%	4%	4%
16	1,535	79%	57%	5%	7%
17	1,225	68%	35%	4%	3%
18	649	61%	54%	2%	7%
19	156	71%	56%	14%	19%
20	1,020	68%	55%	10%	9%
21	365	55%	49%	5%	6%
22	727	57%	34%	3%	2%
23	798	60%	56%	5%	10%
TOTAL	12,998				
MEAN	619	64%	42%	6%	8%
S.D	338	10%	12%	3%	5%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
1	BOSTON HCS: Boston	PCT	96	59%	53%	13%	6%
1	BOSTON HCS: Boston	WSDTT	88	57%	89%	9%	18%
1	BOSTON HCS: Brockton	PCT	35	57%	20%	3%	17%
1	CONNECTICUT HCS: West Haven	PCT	145	44%	54%	8%	6%
1	CONNECTICUT HCS: West Haven	SUPT	50	50%	57%	7%	8%
1	PROVIDENCE	PCT	47	38%	57%	2%	0%
1	WHITE RIVER JUNCTION	PCT	49	65%	54%	4%	10%
2	CANANDAIGUA	PCT	119	73%	47%	10%	5%
2	SYRACUSE	PCT	68	72%	29%	2%	16%
2	WESTERN NY HCS: Batavia	PCT	50	73%	28%	2%	2%
3	BRONX	PCT	8	50%	13%	0%	25%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	65%	53%	0%	0%
3	NEW JERSEY HCS: East Orange	PCT	83	52%	21%	0%	2%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	24%	25%	1%	6%
3	NEW YORK HARBOR HCS: New York	PCT	94	43%	38%	5%	12%
4	COATESVILLE	PCT	72	68%	39%	1%	1%
4	PHILADELPHIA	PCT	129	85%	22%	8%	8%
4	PITTSBURGH HCS: Highland Drive	PCT	41	41%	15%	2%	7%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	79%	14%	4%	0%
5	MARYLAND HCS: Baltimore	PCT	226	69%	40%	12%	8%
5	MARYLAND HCS: Perry Point	PCT	155	85%	26%	24%	32%
5	WASHINGTON DC	PCT	318	47%	59%	3%	2%
6	ASHEVILLE	PCT	50	98%	4%	0%	0%
6	DURHAM	PCT	148	65%	52%	2%	4%
6	FAYETTEVILLE NC	PCT	55	93%	33%	2%	0%
6	HAMPTON	PCT	251	53%	10%	4%	4%
6	SALISBURY	PCT	249	70%	52%	3%	3%
7	ATLANTA	PCT	111	59%	29%	0%	1%
7	AUGUSTA	PCT	39	71%	36%	0%	3%
7	BIRMINGHAM	PCT	160	87%	23%	4%	3%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	88%	11%	9%	0%
7	CHARLESTON	PCT	147	50%	74%	7%	10%
7	DUBLIN	PCT	157	92%	33%	2%	3%
8	BAY PINES	SUPT	252	69%	36%	12%	3%
8	MIAMI	PCT	60	62%	32%	6%	3%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	76%	45%	6%	17%
8	SAN JUAN	PCT	41	83%	27%	2%	0%
8	TAMPA	PCT	79	58%	65%	11%	6%
9	HUNTINGTON	PCT	26	88%	15%	0%	0%
9	LEXINGTON	PCT	44	74%	5%	0%	0%
9	LOUISVILLE	PCT	41	88%	5%	2%	10%
9	MEMPHIS	PCT	105	85%	70%	8%	3%
9	MOUNTAIN HOME	PCT	160	78%	66%	6%	8%
10	BRECKSVILLE	PCT	181	67%	35%	4%	12%
10	BRECKSVILLE	WSDTT	18	76%	61%	11%	28%
10	CHILLICOTHE	PCT	127	24%	0%	0%	0%
10	CINCINNATI	PCT	111	58%	72%	13%	6%
10	COLUMBUS	PCT	96	57%	11%	1%	0%
10	DAYTON	PCT	122	76%	81%	15%	10%
11	ANN ARBOR HCS	PCT	137	69%	66%	8%	4%
11	BATTLE CREEK	PCT	48	58%	25%	8%	2%
11	DANVILLE	PCT	108	62%	63%	5%	3%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	63%	42%	10%	28%
11	NORTHERN IN HCS: Marion	PCT	10	80%	40%	10%	10%

Table 2-17. Psychotropic Medication and Psychiatric Comorbidities Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Psychotropic Medication	Axis I Nonpsychotic Disorder	Axis I Psychotic Disorder	Axis II Personality Disorder
12	CHICAGO HCS: West Side	PCT	139	58%	24%	5%	5%
12	HINES	PCT	53	83%	23%	9%	55%
12	MADISON	WSDTT	29	79%	72%	21%	31%
15	EASTERN KS HCS: Topeka	PCT	53	68%	32%	15%	6%
15	KANSAS CITY	PCT	264	53%	13%	3%	0%
15	POPLAR BLUFF	PCT	52	92%	40%	0%	6%
15	ST. LOUIS	PCT	166	63%	10%	2%	3%
15	WICHITA	PCT	80	49%	55%	4%	14%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	95%	73%	7%	3%
16	FAYETTEVILLE AR	PCT	138	73%	53%	7%	7%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	72%	28%	7%	5%
16	HOUSTON	PCT	454	67%	77%	3%	12%
16	JACKSON	PCT	75	69%	27%	4%	8%
16	MUSKOGEE	PCT	444	98%	39%	4%	0%
16	NEW ORLEANS	PCT	129	57%	65%	7%	2%
16	NEW ORLEANS	WSDTT	25	73%	88%	8%	8%
16	OKLAHOMA CITY	PCT	18	60%	0%	14%	0%
16	SHREVEPORT	PCT	30	90%	70%	7%	53%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	67%	15%	3%	2%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	67%	36%	6%	1%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	72%	38%	13%	16%
17	NORTH TX HCS: Dallas	PCT	181	88%	57%	4%	3%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	60%	36%	3%	2%
18	EL PASO VETERANS HCS	PCT	105	46%	57%	6%	5%
18	NEW MEXICO HCS: Albuquerque	PCT	173	73%	58%	3%	21%
18	PHOENIX	PCT	231	62%	84%	1%	2%
18	SOUTHERN AZ HCS: Tucson	PCT	140	55%	10%	1%	0%
19	CHEYENNE	PCT	66	85%	48%	15%	11%
19	GRAND JUNCTION	PCT	57	74%	89%	19%	37%
19	SALT LAKE CITY HCS	PCT	33	35%	13%	0%	3%
20	BOISE	PCT	86	65%	60%	20%	16%
20	PORTLAND	PCT	336	77%	65%	21%	14%
20	PUGET SOUND HCS: American Lake	PCT	292	62%	39%	5%	4%
20	PUGET SOUND HCS: Seattle	PCT	172	62%	63%	9%	2%
20	SPOKANE	PCT	134	67%	62%	3%	10%
21	HONOLULU	PCT	23	43%	35%	4%	4%
21	NORTHERN CA HCS	PCT	120	61%	76%	7%	4%
21	PALO ALTO HCS: San Jose	PCT	40	25%	0%	0%	5%
21	SAN FRANCISCO	PCT	151	59%	42%	6%	4%
21	SAN FRANCISCO	SUPT	31	63%	48%	7%	26%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	31%	62%	3%	6%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	62%	36%	7%	1%
22	LOMA LINDA	PCT	67	85%	38%	0%	0%
22	LOMA LINDA	WSDTT	32	84%	84%	23%	13%
22	SAN DIEGO HCS CA	PCT	196	52%	44%	3%	2%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	58%	3%	0%	0%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	70%	39%	9%	8%
23	CENTRAL IA HCS: Knoxville	PCT	105	66%	25%	2%	4%
23	IOWA CITY	PCT	223	67%	54%	3%	7%
23	MINNEAPOLIS	PCT	195	50%	62%	4%	13%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	42%	93%	5%	11%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	62%	63%	11%	19%
TOTAL			12,998				
MEAN			123	66%	42%	6%	8%
S.D.			95	16%	23%	5%	10%

Table 2-18. Referral Sources Among Veterans in Specialized  
Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	VAMC Program	RCS Vet Center	Self- Referred	Other Referral
1	510	65%	11%	16%	7%
2	237	87%	3%	8%	2%
3	455	78%	4%	14%	4%
4	270	77%	5%	10%	7%
5	699	91%	2%	5%	1%
6	753	86%	5%	8%	1%
7	718	88%	3%	9%	1%
8	586	92%	3%	4%	1%
9	376	91%	6%	3%	1%
10	655	82%	1%	9%	8%
11	428	77%	3%	13%	7%
12	221	83%	2%	14%	1%
15	615	79%	10%	7%	4%
16	1,535	89%	4%	6%	1%
17	1,225	96%	1%	2%	1%
18	649	84%	4%	12%	0%
19	156	60%	2%	33%	4%
20	1,020	81%	5%	9%	2%
21	365	64%	9%	22%	4%
22	727	78%	9%	9%	3%
23	798	85%	2%	7%	6%
TOTAL	12,998				
MEAN	619	82%	4%	10%	3%
S.D	338	9%	3%	7%	3%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
1	BOSTON HCS: Boston	PCT	96	56%	18%	17%	8%
1	BOSTON HCS: Boston	WSDTT	88	78%	3%	15%	2%
1	BOSTON HCS: Brockton	PCT	35	63%	0%	3%	34%
1	CONNECTICUT HCS: West Haven	PCT	145	57%	18%	20%	4%
1	CONNECTICUT HCS: West Haven	SUPT	50	62%	16%	16%	6%
1	PROVIDENCE	PCT	47	77%	0%	13%	9%
1	WHITE RIVER JUNCTION	PCT	49	76%	0%	22%	0%
2	CANANDAIGUA	PCT	119	84%	3%	9%	3%
2	SYRACUSE	PCT	68	94%	0%	6%	0%
2	WESTERN NY HCS: Batavia	PCT	50	84%	4%	10%	2%
3	BRONX	PCT	8	63%	25%	13%	0%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	70%	5%	25%	0%
3	NEW JERSEY HCS: East Orange	PCT	83	99%	0%	0%	0%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	71%	2%	21%	6%
3	NEW YORK HARBOR HCS: New York	PCT	94	82%	9%	7%	2%
4	COATESVILLE	PCT	72	56%	0%	19%	25%
4	PHILADELPHIA	PCT	129	91%	5%	2%	1%
4	PITTSBURGH HCS: Highland Drive	PCT	41	56%	17%	24%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	100%	0%	0%	0%
5	MARYLAND HCS: Baltimore	PCT	226	90%	1%	7%	2%
5	MARYLAND HCS: Perry Point	PCT	155	83%	3%	14%	0%
5	WASHINGTON DC	PCT	318	95%	3%	0%	0%
6	ASHEVILLE	PCT	50	100%	0%	0%	0%
6	DURHAM	PCT	148	81%	3%	13%	2%
6	FAYETTEVILLE NC	PCT	55	96%	4%	0%	0%
6	HAMPTON	PCT	251	74%	12%	14%	0%
6	SALISBURY	PCT	249	95%	1%	2%	0%
7	ATLANTA	PCT	111	96%	3%	1%	0%
7	AUGUSTA	PCT	39	82%	3%	8%	5%
7	BIRMINGHAM	PCT	160	58%	5%	35%	2%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	100%	0%	0%	0%
7	CHARLESTON	PCT	147	97%	3%	0%	0%
7	DUBLIN	PCT	157	97%	2%	1%	0%
8	BAY PINES	SUPT	252	92%	2%	4%	0%
8	MIAMI	PCT	60	90%	10%	0%	0%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	99%	1%	1%	0%
8	SAN JUAN	PCT	41	100%	0%	0%	0%
8	TAMPA	PCT	79	78%	3%	14%	5%
9	HUNTINGTON	PCT	26	100%	0%	0%	0%
9	LEXINGTON	PCT	44	89%	0%	9%	0%
9	LOUISVILLE	PCT	41	83%	2%	15%	0%
9	MEMPHIS	PCT	105	85%	13%	1%	1%
9	MOUNTAIN HOME	PCT	160	96%	4%	0%	1%
10	BRECKSVILLE	PCT	181	85%	2%	13%	1%
10	BRECKSVILLE	WSDTT	18	83%	6%	0%	11%
10	CHILLICOTHE	PCT	127	63%	0%	1%	36%
10	CINCINNATI	PCT	111	69%	4%	20%	2%
10	COLUMBUS	PCT	96	95%	0%	5%	0%
10	DAYTON	PCT	122	96%	0%	4%	0%
11	ANN ARBOR HCS	PCT	137	77%	5%	15%	3%
11	BATTLE CREEK	PCT	48	63%	0%	17%	21%
11	DANVILLE	PCT	108	74%	1%	12%	12%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	89%	3%	6%	1%
11	NORTHERN IN HCS: Marion	PCT	10	50%	0%	50%	0%

Table 2-19. Referral Sources Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	VAMC Program	RCS Vet Center	Self-Referred	Other Referral
12	CHICAGO HCS: West Side	PCT	139	81%	0%	19%	0%
12	HINES	PCT	53	85%	4%	6%	6%
12	MADISON	WSDTT	29	90%	7%	3%	0%
15	EASTERN KS HCS: Topeka	PCT	53	92%	0%	8%	0%
15	KANSAS CITY	PCT	264	74%	16%	4%	6%
15	POPLAR BLUFF	PCT	52	100%	0%	0%	0%
15	ST. LOUIS	PCT	166	84%	11%	3%	1%
15	WICHITA	PCT	80	59%	1%	30%	9%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	83%	16%	1%	0%
16	FAYETTEVILLE AR	PCT	138	99%	1%	0%	0%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	73%	13%	8%	3%
16	HOUSTON	PCT	454	86%	2%	12%	0%
16	JACKSON	PCT	75	91%	0%	8%	0%
16	MUSKOGEE	PCT	444	94%	3%	3%	0%
16	NEW ORLEANS	PCT	129	91%	3%	5%	1%
16	NEW ORLEANS	WSDTT	25	88%	4%	8%	0%
16	OKLAHOMA CITY	PCT	18	50%	11%	17%	22%
16	SHREVEPORT	PCT	30	100%	0%	0%	0%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	96%	2%	2%	0%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	100%	0%	0%	0%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	97%	1%	0%	0%
17	NORTH TX HCS: Dallas	PCT	181	100%	0%	0%	0%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	93%	2%	4%	1%
18	EL PASO VETERANS HCS	PCT	105	56%	12%	30%	1%
18	NEW MEXICO HCS: Albuquerque	PCT	173	94%	5%	1%	0%
18	PHOENIX	PCT	231	80%	0%	19%	0%
18	SOUTHERN AZ HCS: Tucson	PCT	140	99%	1%	1%	0%
19	CHEYENNE	PCT	66	82%	2%	14%	2%
19	GRAND JUNCTION	PCT	57	44%	0%	53%	4%
19	SALT LAKE CITY HCS	PCT	33	45%	6%	36%	12%
20	BOISE	PCT	86	91%	0%	3%	5%
20	PORTLAND	PCT	336	69%	12%	10%	0%
20	PUGET SOUND HCS: American Lake	PCT	292	87%	1%	8%	4%
20	PUGET SOUND HCS: Seattle	PCT	172	91%	1%	5%	3%
20	SPOKANE	PCT	134	76%	7%	15%	1%
21	HONOLULU	PCT	23	70%	0%	26%	4%
21	NORTHERN CA HCS	PCT	120	75%	4%	17%	4%
21	PALO ALTO HCS: San Jose	PCT	40	95%	0%	5%	0%
21	SAN FRANCISCO	PCT	151	47%	17%	30%	5%
21	SAN FRANCISCO	SUPT	31	61%	6%	19%	3%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	34%	36%	21%	9%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	78%	2%	10%	10%
22	LOMA LINDA	PCT	67	99%	1%	0%	0%
22	LOMA LINDA	WSDTT	32	91%	0%	3%	3%
22	SAN DIEGO HCS CA	PCT	196	86%	12%	1%	1%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	83%	2%	13%	1%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	84%	1%	4%	11%
23	CENTRAL IA HCS: Knoxville	PCT	105	89%	1%	10%	0%
23	IOWA CITY	PCT	223	81%	3%	6%	10%
23	MINNEAPOLIS	PCT	195	82%	2%	9%	8%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	88%	1%	11%	0%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	92%	0%	4%	4%
TOTAL			12,998				
MEAN			123	82%	4%	10%	3%
S.D.			95	15%	6%	10%	6%

Table 2-20. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs, by VISN: FY 2004.

VISN	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	510	71%	10%	16%	18%
2	237	75%	8%	11%	14%
3	455	78%	9%	0%	6%
4	270	86%	11%	48%	44%
5	699	76%	15%	8%	8%
6	753	82%	12%	3%	11%
7	718	80%	17%	4%	7%
8	586	80%	11%	3%	6%
9	376	83%	9%	4%	4%
10	655	82%	10%	20%	21%
11	428	78%	11%	5%	10%
12	221	83%	12%	14%	11%
15	615	78%	10%	1%	7%
16	1,535	87%	10%	3%	4%
17	1,225	83%	16%	4%	9%
18	649	84%	9%	5%	8%
19	156	84%	19%	15%	5%
20	1,020	75%	14%	12%	20%
21	365	72%	16%	5%	8%
22	727	80%	15%	5%	13%
23	798	76%	11%	9%	12%
TOTAL	12,998				
MEAN	619	80%	12%	9%	12%
S.D	338	4%	3%	10%	9%



Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
1	BOSTON HCS: Boston	PCT	96	63%	16%	5%	21%
1	BOSTON HCS: Boston	WSDTT	88	76%	2%	55%	44%
1	BOSTON HCS: Brockton	PCT	35	80%	11%	0%	6%
1	CONNECTICUT HCS: West Haven	PCT	145	67%	7%	7%	6%
1	CONNECTICUT HCS: West Haven	SUPT	50	69%	28%	2%	13%
1	PROVIDENCE	PCT	47	85%	2%	2%	15%
1	WHITE RIVER JUNCTION	PCT	49	67%	8%	33%	29%
2	CANANDAIGUA	PCT	119	76%	11%	9%	18%
2	SYRACUSE	PCT	68	84%	6%	21%	10%
2	WESTERN NY HCS: Batavia	PCT	50	60%	2%	2%	8%
3	BRONX	PCT	8	88%	13%	0%	0%
3	HUDSON VALLEY HCS: Castle Point	PCT	20	80%	5%	0%	5%
3	NEW JERSEY HCS: East Orange	PCT	83	76%	7%	0%	2%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	250	80%	8%	0%	6%
3	NEW YORK HARBOR HCS: New York	PCT	94	70%	14%	1%	9%
4	COATESVILLE	PCT	72	86%	10%	79%	78%
4	PHILADELPHIA	PCT	129	88%	9%	55%	47%
4	PITTSBURGH HCS: Highland Drive	PCT	41	80%	7%	0%	2%
4	PITTSBURGH HCS: Highland Drive	SUPT	28	86%	32%	0%	4%
5	MARYLAND HCS: Baltimore	PCT	226	77%	21%	10%	10%
5	MARYLAND HCS: Perry Point	PCT	155	60%	10%	16%	17%
5	WASHINGTON DC	PCT	318	83%	12%	2%	3%
6	ASHEVILLE	PCT	50	78%	10%	0%	0%
6	DURHAM	PCT	148	81%	6%	1%	20%
6	FAYETTEVILLE NC	PCT	55	84%	2%	0%	0%
6	HAMPTON	PCT	251	82%	18%	8%	16%
6	SALISBURY	PCT	249	83%	12%	1%	7%
7	ATLANTA	PCT	111	86%	32%	4%	13%
7	AUGUSTA	PCT	39	85%	8%	8%	5%
7	BIRMINGHAM	PCT	160	90%	15%	4%	6%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	104	73%	17%	6%	13%
7	CHARLESTON	PCT	147	83%	8%	3%	1%
7	DUBLIN	PCT	157	68%	21%	2%	5%
8	BAY PINES	SUPT	252	84%	13%	0%	6%
8	MIAMI	PCT	60	83%	13%	13%	10%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	154	78%	10%	2%	5%
8	SAN JUAN	PCT	41	78%	2%	2%	0%
8	TAMPA	PCT	79	68%	9%	6%	9%
9	HUNTINGTON	PCT	26	69%	0%	0%	0%
9	LEXINGTON	PCT	44	95%	2%	2%	2%
9	LOUISVILLE	PCT	41	43%	10%	5%	0%
9	MEMPHIS	PCT	105	86%	10%	0%	0%
9	MOUNTAIN HOME	PCT	160	91%	11%	8%	9%
10	BRECKSVILLE	PCT	181	84%	12%	4%	2%
10	BRECKSVILLE	WSDTT	18	50%	11%	89%	17%
10	CHILLICOTHE	PCT	127	92%	0%	2%	4%
10	CINCINNATI	PCT	111	76%	17%	17%	11%
10	COLUMBUS	PCT	96	85%	6%	85%	84%
10	DAYTON	PCT	122	79%	16%	4%	25%
11	ANN ARBOR HCS	PCT	137	79%	15%	4%	15%
11	BATTLE CREEK	PCT	48	73%	23%	2%	4%
11	DANVILLE	PCT	108	72%	4%	4%	6%
11	NORTHERN IN HCS: Fort Wayne	PCT	125	82%	8%	9%	11%
11	NORTHERN IN HCS: Marion	PCT	10	100%	0%	20%	0%

Table 2-21. Medical Status, Incarceration, Sexual and Noncombat Trauma Among Veterans in Specialized Outpatient PTSD Programs: FY 2004.

VISN	FACILITY	PROGRAM	N	Chronic Medical Problem (Current)	Incarcerated >2 Weeks (Lifetime)	PTSD Due to Sexual Trauma	PTSD Due to Noncombat Nonsexual Trauma
12	CHICAGO HCS: West Side	PCT	139	87%	15%	3%	12%
12	HINES	PCT	53	81%	9%	8%	2%
12	MADISON	WSDTT	29	64%	3%	81%	24%
15	EASTERN KS HCS: Topeka	PCT	53	70%	13%	2%	8%
15	KANSAS CITY	PCT	264	80%	9%	2%	13%
15	POPLAR BLUFF	PCT	52	85%	0%	0%	0%
15	ST. LOUIS	PCT	166	75%	12%	1%	2%
15	WICHITA	PCT	80	78%	18%	0%	0%
16	CENTRAL AR VETERANS HCS: No. Little Rock	PCT	125	100%	26%	2%	4%
16	FAYETTEVILLE AR	PCT	138	90%	7%	1%	7%
16	GULF COAST VETERANS HCS: Gulfport	PCT	97	85%	7%	3%	7%
16	HOUSTON	PCT	454	77%	16%	3%	4%
16	JACKSON	PCT	75	89%	9%	8%	1%
16	MUSKOGEE	PCT	444	98%	2%	0%	1%
16	NEW ORLEANS	PCT	129	74%	9%	1%	4%
16	NEW ORLEANS	WSDTT	25	44%	0%	36%	29%
16	OKLAHOMA CITY	PCT	18	75%	17%	17%	11%
16	SHREVEPORT	PCT	30	76%	17%	7%	3%
17	CENTRAL TX VETERANS HCS: Austin	PCT	255	75%	18%	6%	9%
17	CENTRAL TX VETERANS HCS: Temple	PCT	181	86%	20%	8%	8%
17	CENTRAL TX VETERANS HCS: Waco	PCT	88	60%	17%	6%	28%
17	NORTH TX HCS: Dallas	PCT	181	86%	16%	2%	2%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	520	88%	12%	3%	10%
18	EL PASO VETERANS HCS	PCT	105	83%	11%	5%	11%
18	NEW MEXICO HCS: Albuquerque	PCT	173	86%	7%	14%	8%
18	PHOENIX	PCT	231	90%	7%	0%	0%
18	SOUTHERN AZ HCS: Tucson	PCT	140	76%	14%	3%	20%
19	CHEYENNE	PCT	66	86%	21%	24%	5%
19	GRAND JUNCTION	PCT	57	88%	16%	5%	2%
19	SALT LAKE CITY HCS	PCT	33	75%	18%	12%	12%
20	BOISE	PCT	86	78%	0%	7%	2%
20	PORTLAND	PCT	336	71%	23%	7%	20%
20	PUGET SOUND HCS: American Lake	PCT	292	75%	13%	18%	30%
20	PUGET SOUND HCS: Seattle	PCT	172	81%	9%	15%	22%
20	SPOKANE	PCT	134	75%	10%	11%	6%
21	HONOLULU	PCT	23	87%	9%	0%	9%
21	NORTHERN CA HCS	PCT	120	82%	13%	0%	0%
21	PALO ALTO HCS: San Jose	PCT	40	55%	15%	3%	15%
21	SAN FRANCISCO	PCT	151	66%	17%	11%	11%
21	SAN FRANCISCO	SUPT	31	77%	35%	0%	10%
22	GREATER LOS ANGELES HCS: East LA	PCT	94	87%	20%	2%	3%
22	GREATER LOS ANGELES HCS: West LA	PCT	125	81%	33%	2%	31%
22	LOMA LINDA	PCT	67	76%	27%	6%	9%
22	LOMA LINDA	WSDTT	32	69%	3%	56%	31%
22	SAN DIEGO HCS CA	PCT	196	85%	12%	2%	18%
22	SOUTHERN NV HCS: Las Vegas	PCT	213	76%	5%	3%	2%
23	BLACK HILLS HCS: Fort Meade	SUPT	79	86%	13%	6%	15%
23	CENTRAL IA HCS: Knoxville	PCT	105	74%	17%	2%	5%
23	IOWA CITY	PCT	223	83%	9%	16%	11%
23	MINNEAPOLIS	PCT	195	67%	9%	6%	9%
23	NEBRASKA-WESTERN IA HCS: Lincoln	PCT	84	51%	2%	6%	12%
23	NEBRASKA-WESTERN IA HCS: Omaha	PCT	112	88%	20%	12%	21%
TOTAL			12,998				
MEAN			123	78%	12%	10%	11%
S.D.			95	11%	8%	18%	13%

### **PART III: PROGRAMMATIC CAPACITY**

Part III presents tables for the workload, staffing and costs for FY 2004 of both the Specialized Outpatient PTSD Programs (SOPPs) and the Specialized Intensive PTSD Programs (SIPPs). In addition, the changes from FY 1996, FY 1997, and FY 1998 are presented for selected variables. Tracking of changes in administrative operation annually permits an examination of the shifting of programmatic capacity due to the reallocation of resources and/or the restructuring of clinical services. The data are presented at the VISN and individual program levels for the SOPPs, and at the VISN and facility levels for the SIPPs. Because programmatic changes continue to take place for a large number of SIPPs, it is difficult to present representative data for individual SIPPs over time. For this reason, we have shifted our approach to presenting aggregated data representing all SIPPs at a facility for workload, staffing, and costs.

#### ***Specialized PTSD Programs***

Program types comprising the SOPPs are the PTSD Clinical Team (PCT), the Substance Use and PTSD Team (SUPT) and the Women's Stress Disorder Treatment Team (WSDTT). These program types are organized around the model of an ambulatory clinic. Veterans typically come in for services with an upper limit of approximately two times a week for one or two clinical contacts each time.

For SIPPs, program types include the Evaluation and Brief Treatment Unit (EBTPU), the PTSD Domiciliary (PTSD Dom), the PTSD Residential Rehabilitation Program (PRRP), the Specialized Inpatient PTSD Unit (SIPU), and the Women's Trauma Recovery Program (WTRP). Also included, as an intensive program, is the PTSD Day Hospital (DH). PTSD Day Hospitals are outpatient in nature but involve coming in for services either on a daily basis or several times a week in which the clinical contacts are of four to eight hours duration.

#### ***Sources of Data***

At the end of each fiscal year, the Northeast Program Evaluation Center (NEPEC) conducts a survey of all VA facilities with specialized PTSD programs asking for information concerning the workload, the FTEE and the expenditures for each program. This survey is called the *Specialized PTSD Programs Annual Report*. In FY 1997 the Annual Report was expanded to include a comprehensive assessment of all nursing staff as part of the total FTEE accounting for each intensive program. For this reason, FY 1997 is generally used as the base year for all differences computed for intensive programs. The only exception to this procedure is when FY 1997 data are not reported. For those situations, FY 1998 data are used, as noted in the affected tables. For outpatient programs, differences are calculated between FY 1996 and FY 2004.

For SOPPs, the number of veterans seen, the number of veterans treated and the number of outpatient visits are derived from the stop code data that are obtained from the Austin Data Processing Center in Austin, Texas. Veterans *seen* include all veterans receiving services, while veterans *treated* include only those seen more than once. *New veterans treated* are those who were not seen in the previous fiscal year. For SIPPs, the number of veterans admitted and the number of bed days are obtained from the Annual Report.

### ***Workload for SOPPs***

Workload data for the SOPPs are presented by VISN in Table 3-1 and by individual program in Table 3-2. Differences from FY 1996 to FY 2004 are presented for number of visits, number of veterans seen, number of veterans treated and the percent of new veterans treated. Table 3-1 presents the unique number of veterans seen, the unique number of veterans treated, and the unique number of new veterans by VISN and nationally for FY 2004. In the past, these data were presented in years prior to 2001 as the sum of the individual programs. This allowed for a duplicated count of veterans. For FY 2001 and beyond, it was decided that these data would be totaled in two different ways: (1) as the “SUM” of the individual programs; and (2), as the unduplicated counts of veterans, which are determined for the VA as a total system as “ALL VA”. The number of visits, the number of veterans seen, and the number of veterans treated represent *Gross Output*. *Productivity* is represented by two indices. One index is the number of visits per filled FTEE. This index is relevant to the standard of 1000 visits per FTEE that was the operative standard in VA prior to the adoption of the Special Emphasis Program (SEP) goals as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. The other index, the number of veterans treated per filled FTEE, is relevant to the SEP goal of 75 veterans treated per FTEE. VISNs and individual programs not meeting these targets are boxed/highlighted in the tables. Nationally for FY 2004, the total number of visits for ALL VA was 695,417 the total number of veterans seen was 80,201 and the total number of veterans treated was 60,160. The percent of veterans treated who were new was 32% (see Table 3-1).

### ***Workload for SIPPs***

Workload data for the SIPPs can be found by VISN in Table 3-3 and by individual VA facility in Table 3-4. For each VA facility, the total number of admissions (episodes) to all programs and the total days of treatment represent *gross output*. *Efficiency* is represented the number of days of treatment per admission. “Total days of treatment”, for programs other than PTSD Day Hospitals, is equal to the bed days of care reported on the Annual Report. For PTSD Day Hospitals, the number of stop code visits accrued for the fiscal year represents days of treatment. Total days of treatment for PTSD Day Hospitals is generally less than the actual number of days spent in the program. This is due to the fact that PTSD Day Hospitals do not provide treatment seven days a week. Differences are presented for each variable. Across all VISNs for FY 2004, the total number of admissions was 3,995 and the total number of days of treatment was 190,352 (see Table 3-3).

### ***Staffing of the SOPPs***

Staffing of the SOPPs, represented as filled FTEE, and the change in staffing levels between FY 1996 and FY 2004 are presented by VISN in Table 3-5 and by individual program in Table 3-6. Filled FTEE is calculated from the data supplied from the Annual Report. [See Appendix C.] A total of 533.75 FTEE were filled for FY 2004. There was substantial shifting within individual programs resulting in an increase of 112.33 FTEE in staffing levels nationally.

### ***Staffing of the SIPPs***

Staffing of the SIPPs and the change in staffing levels are presented by VISN in Table 3-7 and by individual VA facility in Table 3-8. Overall, there were 324.07 FTEE filled for FY 2004. As in the past, there were a number of programmatic changes within the SIPPs during FY 2004. Several VA facilities reconfigured inpatient units to PRRPs, PTSD Doms and PTSD Day Hospitals. Adjustments in staffing levels accompanied these changes. SIPP FTEE experienced a drop of 272.33 FTEE throughout all VA over the period from FY 1997 through FY 2004.

### ***Costs of the SOPPS***

The direct costs for the SOPPs are presented in Table 3-9 by VISN and in Table 3-10 by individual program. Direct costs are calculated by using filled FTEE and expenditure data supplied from the Annual Report. [See Appendix C.] The *cost-efficiency* of the programs is represented by two indices: cost per visit and cost per capita. The former is calculated as the ratio of direct costs to number of visits, and the latter is calculated as the ratio of direct costs to number of veterans treated. In addition, differences between FY 2004 and FY 1996 are presented for cost per visit, cost per capita and direct costs. As seen in Table 3-9, the SOPPs treated nationwide a total of 60,160 veterans with 695,417 visits at an overall direct cost of \$53,975,776. The average cost per visit was \$78. The average cost per capita was \$897.

### ***Costs of the SIPPS***

The direct costs for the SIPPs are presented by VISN in Table 3-11 and by individual VA facility in Table 3-12. The *cost-efficiency* of the programs is represented by two indices: cost per diem and cost per capita. The former is calculated as the ratio of direct costs to number of days of treatment, and the latter is calculated as the ratio of direct costs to number of veterans admitted. The differences in costs are also calculated. Nationwide in FY 2004, the SIPPs admitted a total of 3,995 veterans with 190,352 days of treatment at an overall direct cost of \$25,873,598. The average cost per diem was \$136, and the average cost per capita was \$6,476.

Table 3-1. Workload for Specialized Outpatient PTSD Programs for FY 2004, by VISN.

VISN	FY 2004			DIFF: FY 2004 - FY 1996			FY 2004			FY 2004		DIFF: FY 2004 - 1996
	# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	NEW VETS TREATED/ VETS TREATED (%)	# NEW VETS TREATED/ VETS TREATED (%)
1	43,519	4,185	3,434	8,256	910	1,053	29.81	1,460	115	854	25%	-15%
2	12,468	1,328	1,041	5,217	805	623	11.73	1,063	89	435	42%	18%
3	46,496	3,802	2,975	25,299	2,387	1,910	26.04	1,785	114	819	28%	-13%
4	30,353	3,589	2,700	9,373	1,499	1,325	23.03	1,318	117	786	29%	-6%
5	21,876	2,262	1,600	8,873	1,243	851	14.62	1,497	109	768	48%	-10%
6	27,602	4,205	3,064	12,490	2,382	1,650	19.03	1,451	161	944	31%	-11%
7	42,293	5,130	3,513	25,459	3,510	2,336	34.02	1,243	103	1,232	35%	-8%
8	30,279	3,738	2,916	12,562	2,046	1,727	24.18	1,252	121	831	28%	-10%
9	19,025	3,218	2,157	6,100	1,551	912	16.46	1,156	131	671	31%	-21%
10	29,254	3,606	2,605	23,772	2,914	2,045	36.84	794	71	1,036	40%	1%
11	17,110	2,337	1,634	6,218	831	584	18.18	941	90	494	30%	-1%
12	14,320	1,325	1,036	2,691	444	357	11.94	1,200	87	425	41%	-10%
15	30,228	3,067	2,353	11,585	1,574	1,218	20.69	1,461	114	598	25%	-10%
16	98,875	11,506	8,884	59,884	7,378	5,869	59.28	1,668	150	2,823	32%	-1%
17	29,624	3,666	2,754	9,357	1,997	1,437	26.00	1,139	106	1,036	38%	-16%
18	32,021	4,469	3,306	9,660	2,211	1,678	20.34	1,574	163	852	26%	-15%
19	11,009	1,742	1,177	-727	514	253	13.10	840	90	343	29%	-12%
20	53,291	6,025	4,671	31,365	4,022	3,194	39.20	1,359	119	1,644	35%	-9%
21	34,537	3,403	2,378	14,670	1,809	1,136	27.98	1,235	85	882	37%	-11%
22	44,424	4,548	3,526	29,567	3,564	2,814	28.73	1,546	123	1,200	34%	-5%
23	26,813	3,198	2,472	-4,319	556	515	32.56	824	76	705	29%	-8%
SUM	695,417	80,349	60,196	307,352	44,147	33,487	533.75	1,303	113	19,378	32%	-9%
All VA	695,417	80,201	60,160	307,352	44,378	33,623	533.75	1,303	113	19,417	32%	-9%

Note: A boxed/highlighted cell signifies a VISN whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans treated per filled FTEE.

Table 3.2 Workload for Specialized Outpatient PTSD Programs for FY 2004, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2004			DIFF: FY 2004 - FY 1996			FY 2004			FY 2004		DIFF: FY 2004 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED (%)	# NEW VETS TREATED (%)
1	BOSTON (MA) HCS: Boston	PCT	6,561	662	479	2,808	291	173	3.81	1,722	126	146	30%	-33%
1	BOSTON (MA) HCS: Boston	WSDTT	3,752	279	227	898	-8	74	3.33	1,125	68	72	32%	-33%
1	BOSTON (MA) HCS: Brockton	PCT	6,681	651	542	-1,080	-362	-144	5.06	1,319	107	151	28%	-29%
1	CONNECTICUT HCS: West Haven*	PCT	8,624	821	688	8,624	821	688	5.32	1,620	129	130	19%	19%
1	CONNECTICUT HCS: West Haven	SUPT	3,288	366	311	284	79	117	4.92	669	63	75	24%	-15%
1	MANCHESTER, NH**	PCT	0	0	0	-2,923	-229	-182	0.00	NA	NA	0	NA	NA
1	PROVIDENCE, RI	PCT	11,965	1,260	1,022	5,026	674	546	5.31	2,251	192	214	21%	-17%
1	TOGUS, ME**	PCT	0	0	0	-4,110	-487	-364	0.00	NA	NA	NA	NA	NA
1	WHITE RIVER JUNCTION, VT	PCT	2,648	456	339	-1,271	-71	-54	2.05	1,294	166	98	29%	-6%
2	CANANDAIGUA, NY	PCT	6,210	590	450	2,280	332	232	4.70	1,322	96	236	52%	24%
2	SYRACUSE, NY*	PCT	2,930	377	302	2,930	377	302	3.32	882	91	92	30%	30%
2	WESTERN NY HCS: Batavia	PCT	3,328	376	296	7	99	-9	3.71	897	80	109	37%	-20%
3	BRONX, NY	PCT	11,597	591	496	4,781	316	285	8.42	1,378	59	108	22%	-17%
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	4,638	417	322	4,638	417	322	1.88	2,467	171	152	47%	47%
3	NEW JERSEY HCS: East Orange	PCT	9,653	880	656	8,188	737	543	4.87	1,984	135	227	35%	-65%
3	NEW YORK HARBOR HCS: Brooklyn	PCT	10,200	1,152	850	-765	500	359	4.89	2,087	174	228	27%	-9%
3	NEW YORK HARBOR HCS: New York	PCT	10,408	799	671	8,457	477	428	5.99	1,738	112	109	16%	-27%
4	CLARKSBURG, WV**	PCT	0	0	0	-4,235	-538	-366	0.00	NA	NA	0	NA	NA
4	COATESVILLE, PA	PCT	9,993	1,066	724	4,922	587	353	6.92	1,444	105	225	31%	-12%
4	PHILADELPHIA, PA	PCT	11,759	1,405	1,095	6,842	622	610	6.38	1,844	172	318	29%	-11%
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,397	930	711	1,801	398	254	7.07	905	101	221	31%	-5%
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,204	224	192	43	19	17	2.66	828	72	28	15%	-20%
5	MARYLAND HCS: Baltimore	PCT	5,837	844	567	1,908	435	290	4.35	1,341	130	262	46%	-6%
5	MARYLAND HCS: Perry Point	PCT	4,014	334	243	1,474	101	55	3.48	1,152	70	123	51%	-49%
5	WASHINGTON, DC	PCT	12,025	1,194	853	5,491	835	561	6.78	1,773	126	402	47%	0%
6	ASHEVILLE, NC	PCT	3,354	391	254	2,086	209	145	2.16	1,556	118	30	12%	-81%
6	DURHAM, NC	PCT	4,757	1,010	770	980	401	278	5.06	940	152	203	26%	-27%
6	FAYETTEVILLE, NC*	PCT	5,299	357	299	5,299	357	299	2.76	1,921	108	112	37%	37%
6	HAMPTON, VA	PCT	10,064	1,363	1,086	3,834	764	579	5.90	1,706	184	362	33%	-4%
6	SALISBURY, NC	PCT	4,128	1,104	663	291	696	361	3.15	1,310	210	237	36%	1%
7	ATLANTA, GA	PCT	6,900	645	453	2,839	328	248	2.71	2,549	167	198	44%	-20%
7	AUGUSTA, GA*	PCT	11,565	1,312	1,036	11,565	1,312	1,036	12.16	951	85	282	27%	27%
7	BIRMINGHAM, AL	PCT	6,437	1,107	691	3,433	652	361	4.02	1,602	172	238	34%	-15%
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,853	824	439	3,027	552	221	6.10	960	72	196	45%	-9%
7	CHARLESTON, SC	PCT	3,985	611	466	874	267	183	3.01	1,325	155	99	21%	-18%
7	DUBLIN, GA*	PCT	7,553	658	441	7,553	658	441	6.03	1,253	73	220	50%	50%
7	TUSCALOOSA, AL**	PCT	0	0	0	-3,832	-483	-358	0.00	NA	NA	0	NA	NA
8	BAY PINES, FL	PCT	9,607	1,196	960	6,371	845	742	10.61	905	90	227	24%	-37%
8	MIAMI, FL	PCT	4,837	485	380	1,604	260	231	3.56	1,359	107	75	20%	-12%
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,331	511	388	2,805	292	214	3.99	1,335	97	173	45%	-11%
8	SAN JUAN, PR	PCT	3,193	569	440	-546	34	63	4.01	796	110	43	10%	-19%
8	TAMPA, FL	PCT	7,311	990	752	2,328	667	500	2.01	3,645	375	314	42%	-9%

Table 3.2 Workload for Specialized Outpatient PTSD Programs for FY 2004, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2004			DIFF: FY 2004 - FY 1996			FY 2004			FY 2004		DIFF: FY 2004 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED (%)	# NEW VETS TREATED (%)
9	HUNTINGTON, WV*	PCT	1,218	503	217	1,218	503	217	2.22	548	98	126	58%	58%
9	LEXINGTON, KY	PCT	5,698	324	285	4,648	110	125	3.21	1,776	89	130	46%	-54%
9	LOUISVILLE, KY	PCT	1,716	463	332	5	179	123	2.34	732	142	91	27%	-55%
9	MEMPHIS, TN	PCT	4,654	787	539	499	400	237	3.50	1,329	154	164	30%	-16%
9	MIDDLE TN HCS: Murfreesboro**	PCT	0	0	0	-1,741	-210	-172	0.00	NA	NA	0	NA	NA
9	MIDDLE TN HCS: Nashville**	PCT	0	0	0	-597	-88	-78	0.00	NA	NA	0	NA	NA
9	MOUNTAIN HOME, TN	PCT	5,739	1,141	784	2,068	561	357	5.18	1,108	151	160	20%	-27%
10	BRECKSVILLE, OH*	PCT	11,119	876	624	11,119	876	624	13.12	847	48	202	32%	32%
10	BRECKSVILLE, OH	WSDTT	871	154	99	-888	-51	-57	2.86	305	35	31	31%	-30%
10	CHILLICOTHE, OH	PCT	4,111	926	697	388	435	270	5.29	778	132	193	28%	-10%
10	CINCINNATI, OH*	PCT	6,608	783	573	6,608	783	573	8.82	749	65	277	48%	48%
10	COLUMBUS, OH*	PCT	2,775	486	300	2,775	486	300	3.06	907	98	146	49%	49%
10	DAYTON, OH*	PCT	3,770	513	384	3,770	513	384	3.70	1,020	104	202	53%	53%
11	ANN ARBOR (MI) HCS	PCT	3,370	364	258	923	127	91	3.45	977	75	90	35%	-4%
11	BATTLE CREEK, MI	PCT	6,407	863	629	3,144	311	299	5.00	1,281	126	162	26%	-16%
11	DANVILLE, IL	PCT	2,500	456	298	-30	138	32	2.41	1,038	124	109	37%	-9%
11	NORTHERN IN HCS: Fort Wayne*	PCT	1,548	272	172	1,548	272	172	3.71	417	46	87	51%	51%
11	NORTHERN IN HCS: Marion	PCT	3,285	417	300	633	59	12	3.61	909	83	48	16%	-11%
12	CHICAGO (IL) HCS: West Side	PCT	10,513	676	547	3,369	29	272	6.49	1,619	84	176	32%	-4%
12	HINES, IL	PCT	2,425	407	308	-524	171	105	3.51	691	88	192	62%	18%
12	IRON MOUNTAIN, MI**	PCT	0	0	0	-1,536	-291	-204	0.00	NA	NA	0	NA	NA
12	MADISON, WI*	WSDTT	1,382	243	181	1,382	243	181	1.94	714	94	57	31%	31%
15	EASTERN KS HCS: Topeka	PCT	8,353	492	421	470	41	11	7.02	1,190	60	48	11%	-29%
15	KANSAS CITY, MO	PCT	5,593	756	569	2,456	445	340	3.20	1,745	178	180	32%	-19%
15	POPLAR BLUFF, MO*	PCT	2,432	514	396	2,432	514	396	2.42	1,006	164	150	38%	38%
15	ST. LOUIS, MO	PCT	9,045	1,052	756	5,761	718	473	5.08	1,779	149	153	20%	-31%
15	WICHITA, KS	PCT	4,805	257	212	466	-74	-33	2.97	1,619	71	67	32%	-2%
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	9,073	1,531	1,204	9,073	1,531	1,204	5.23	1,735	230	287	24%	24%
16	FAYETTEVILLE, AR	PCT	3,694	906	632	1,280	408	251	3.19	1,159	198	291	46%	9%
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	9,830	893	753	5,412	292	327	4.16	2,365	181	104	14%	-18%
16	HOUSTON, TX	PCT	23,395	2,614	2,100	14,290	1,800	1,462	16.93	1,382	124	572	27%	-12%
16	JACKSON, MS	PCT	6,261	1,029	912	2,507	585	597	6.77	925	135	236	26%	-19%
16	MUSKOGEE, OK*	PCT	8,387	1,194	769	8,387	1,194	769	3.01	2,788	256	554	72%	72%
16	NEW ORLEANS, LA	PCT	26,069	2,318	1,816	15,103	915	863	10.63	2,453	171	447	25%	-17%
16	NEW ORLEANS, LA	WSDTT	806	120	82	-751	-146	-71	1.59	508	52	31	38%	-9%
16	OKLAHOMA CITY, OK	PCT	9,366	602	501	2,589	133	110	4.99	1,877	100	118	24%	-25%
16	SHREVEPORT, LA*	PCT	1,994	444	204	1,994	444	204	2.80	713	73	202	99%	99%
17	CENTRAL TX VETERANS HCS: Austin*	PCT	4,791	577	400	4,791	577	400	5.41	885	74	233	58%	58%
17	CENTRAL TX VETERANS HCS: Temple	PCT	2,764	395	286	-37	237	154	2.24	1,237	128	137	48%	-49%
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,264	383	305	-925	31	-8	4.21	1,012	72	87	29%	-71%
17	NORTH TX HCS: Dallas	PCT	7,934	592	410	1,753	90	43	6.02	1,319	68	124	30%	-17%
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,871	1,756	1,375	3,775	1,136	860	8.13	1,215	169	473	34%	1%



Table 3.2 Workload for Specialized Outpatient PTSD Programs for FY 2004, by Individual Program.

VISN	FACILITY	PROGRAM	FY 2004			DIFF: FY 2004 - FY 1996			FY 2004			FY 2004		DIFF: FY 2004 - FY 1996
			# VISITS	# VETS SEEN	# VETS TREATED	# VISITS	# VETS SEEN	# VETS TREATED	# FILLED FTEE	# VISITS PER FILLED FTEE	# VETS TREATED PER FILLED FTEE	# NEW VETS TREATED	# NEW VETS TREATED/#VETS TREATED (%)	# NEW VETS TREATED/# VETS TREATED (%)
18	EL PASO (TX) VETERANS HCS	PCT	6,615	928	615	-393	174	102	4.11	1,609	150	192	31%	-16%
18	NEW MEXICO HCS (Albuquerque)	PCT	12,134	1,825	1,413	5,320	1,307	1,004	8.05	1,508	176	340	24%	-32%
18	PHOENIX, AZ	PCT	7,310	758	608	2,718	332	278	5.01	1,458	121	161	26%	-25%
18	SOUTHERN AZ HCS (Tucson)	PCT	5,962	969	674	2,015	479	308	3.17	1,881	213	159	24%	-20%
19	CHEYENNE, WY	PCT	2,040	335	206	-521	-3	-71	2.11	969	98	84	41%	6%
19	EASTERN COLORADO HCS: Denver**	PCT	0	0	0	-3,389	-336	-243	0.00	NA	NA	0	NA	NA
19	GRAND JUNCTION, CO	PCT	264	163	33	-885	17	-62	4.41	60	7	3	9%	-91%
19	SALT LAKE CITY (UT) HCS	PCT	8,705	1,245	938	4,068	852	632	6.59	1,321	142	256	27%	-18%
20	BOISE, ID	PCT	3,216	400	267	-1,487	-129	-117	5.39	597	50	105	39%	-3%
20	PORTLAND, OR	PCT	9,648	1,211	932	6,178	933	634	8.96	1,077	104	386	41%	-5%
20	PUGET SOUND (WA) HCS: Seattle	PCT	36,774	3,929	3,166	23,021	2,492	2,079	21.68	1,696	146	996	31%	-24%
20	SPOKANE, WA*	PCT	3,653	544	346	3,653	544	346	3.17	1,153	109	170	49%	49%
21	HONOLULU, HI	PCT	7,543	556	376	3,711	174	97	5.41	1,393	69	117	31%	-14%
21	NORTHERN CA HCS	PCT	1,600	551	245	-921	138	-70	2.81	570	87	161	66%	-26%
21	PALO ALTO (CA) HCS: San Jose	PCT	8,197	696	553	4,805	407	317	3.21	2,555	172	180	33%	-29%
21	SAN FRANCISCO, CA	PCT	13,609	1,489	1,111	7,317	739	500	12.53	1,086	89	394	35%	-23%
21	SAN FRANCISCO, CA	SUPT	3,588	148	114	-242	-36	-22	4.01	895	28	34	30%	-17%
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,176	615	501	949	104	130	4.13	1,496	121	51	10%	-25%
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	6,923	688	541	6,923	688	541	9.23	750	59	241	45%	45%
22	LOMA LINDA, CA	PCT	4,049	385	258	1,038	132	65	1.55	2,605	166	107	41%	1%
22	LOMA LINDA, CA	WSDTT	1,815	283	182	-251	134	69	2.56	710	71	54	30%	-14%
22	SAN DIEGO (CA) HCS CA	PCT	17,211	1,750	1,353	12,658	1,205	924	6.71	2,565	202	388	29%	-25%
22	SOUTHERN NV HCS (Las Vegas)*	PCT	8,250	858	708	8,250	858	708	4.56	1,810	155	364	51%	51%
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,518	394	345	403	119	137	4.65	971	74	89	26%	-12%
23	CENTRAL IA HCS: Knoxville	PCT	2,465	211	160	-1,922	-79	-94	1.43	1,725	112	62	39%	-8%
23	IOWA CITY, IA	PCT	2,559	614	338	-1,269	-28	-91	3.76	681	90	124	37%	5%
23	MINNEAPOLIS, MN	PCT	10,099	1,180	993	2,671	553	513	13.77	734	72	234	24%	-16%
23	NE-WESTERN IA HCS: Lincoln	PCT	2,423	344	229	179	175	89	2.87	845	80	76	33%	-10%
23	NE-WESTERN IA HCS: Omaha	PCT	4,749	468	412	2,167	260	245	6.08	781	68	122	30%	-14%
23	SIOUX FALLS, SD**	PCT	0	0	0	-860	-126	-91	0.00	NA	NA	0	NA	NA
23	ST. CLOUD, MN**	PCT	0	0	0	-5,688	-545	-421	0.00	NA	NA	0	NA	NA
SUM			695,417	81,423	60,801	307,352	42,194	31,285	533.75	1,303	114	19,522	32%	-16%
ALL VA			695,417	80,201	60,160	307,352	44,378	33,623	533.75	1,303	113	19,417	32%	-9%

Note: A boxed/highlighted cell signifies a program whose Specialized Outpatient Treatment does not meet the standard of 1000 visits per filled FTEE, and/or does not meet the goal of 75 veterans per treated filled FTEE.

NA=Not applicable.

\* The Specialized Outpatient PTSD program at this facility was not open in the base year.

\*\* The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year.

Table 3-3. Workload for Specialized Intensive PTSD Programs, by VISN, FY 2004.

VISN	FY 2004			DIFFERENCE: FY 2004- FY1997		
	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM	# OF ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM
1	367	8,759	24	-53	-6,096	-12
2	90	2,395	27	-150	-1,553	10
3	258	12,340	48	-265	-6,621	12
4	201	13,752	68	-175	-1,873	27
5	254	16,134	64	28	6,247	20
6	247	8,727	35	10	-298	-3
7**	0	0	NA	-811	-19,567	NA
8	165	8,817	53	28	966	-4
10	122	3,682	30	-95	-7,607	-22
11	341	8,382	25	47	-217	-5
12	345	17,051	49	-58	593	9
15	100	4,262	43	-11	-6,688	-56
16	285	40,059	141	-87	27,468	107
17	135	9,834	73	6	2,719	18
18*	81	1,396	17	81	1,396	NA
19	134	3,414	25	-51	-5,366	-22
20	509	12,149	24	-193	-8,315	-5
21	275	15,052	55	-93	-3,978	3
22**	0	0	NA	-82	-4,703	NA
23	86	4,147	48	-95	-9,081	-25
ALL VA	3,995	190,352	48	-2,019	-42,574	9

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

NA=Not Applicable.

\* No Specialized Intensive PTSD Program in this VISN was open in the base year.

\*\* No Specialized Intensive PTSD Program in this VISN was open in the current fiscal year.

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2004.

VISN	FACILITY	FY 2004			DIFFERENCE: FY 2004 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)
1	CONNECTICUT HCS: Newington*	22	2,155	98	22	2,155	NA
1	CONNECTICUT HCS: West Haven**	0	0	NA	-46	-3,434	NA
1	NORTHAMPTON, MA	71	4,573	64	-38	-2,427	0
1	TOGUS, ME†	214	1,345	20	23	-2,468	4
1	WHITE RIVER JUNCTION, VT†	60	686	14	-14	78	-6
2	WESTERN NY HCS: Batavia	90	2,395	26	-150	-1,553	10
3	BRONX, NY**	0	0	NA	-146	-2,972	NA
3	HUDSON VALLEY (NY) HCS: Montrose	125	6,228	50	-55	-439	13
3	NEW JERSEY HCS: Lyons	133	6,112	46	-64	-3,210	-1
4	CLARKSBURG, WV	58	2,896	50	-86	1,114	38
4	COATESVILLE, PA	143	10,856	76	-89	-2,987	16
5	MARTINSBURG, WV	149	14,609	98	26	5,755	26
5	MARYLAND HCS: Baltimore	105	1,525	42	2	492	32
6	SALEM, VA	119	3,809	32	2	-279	-3
6	SALISBURY, NC	128	4,918	38	8	-19	-3
7	AUGUSTA, GA**	0	0	NA	-431	-8,505	NA
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	NA	-210	-5,534	NA
7	TUSCALOOSA, AL† **	0	0	NA	-170	-5,528	NA
8	BAY PINES, FL	101	3,683	36	25	147	-10
8	MIAMI, FL	64	5,134	80	3	819	9
10	BRECKSVILLE, OH	23	399	70	-25	-2,961	0
10	CINCINNATI, OH	54	649	49	-52	-2,987	15
10	DAYTON, OH	45	2,634	90	-18	-1,659	22
11	BATTLE CREEK, MI	341	8,382	25	47	-217	-5
12	MILWAUKEE, WI	40	6,577	164	22	1,453	-120
12	NORTH CHICAGO, IL	235	7,200	31	-40	-823	1
12	TOMAH, WI	70	3,274	47	-40	-37	17
15	EASTERN KS HCS: Topeka	100	4,262	43	-11	-6,688	-56
16	CENTRAL AR VETERANS HCS (Little Rock)	164	35,421	216	16	27,658	164
16	JACKSON, MS	58	2,410	42	-67	85	23
16	NEW ORLEANS, LA	63	2,228	35	-36	-275	10
17	CENTRAL TX VETERANS HCS: Waco	135	9,834	73	6	2,719	18
18	SOUTHERN AZ HCS (Tucson)*	81	1,396	17	81	1,396	NA
19	EASTERN COLORADO HCS: Denver	134	3,414	38	23	-2,197	-13
19	SHERIDAN, WY**	0	0	NA	-74	-3,169	NA

Table 3-4. Workload for Specialized Intensive PTSD Programs, by VA Facility, FY 2004.

VISN	FACILITY	FY 2004			DIFFERENCE: FY 2004 - FY 1997		
		# Of ADMISSIONS	#Of DAYS OF TREATMENT	LENGTH OF PROGRAM (days)	# Of ADMISSIONS	# OF DAYS OF TREATMENT	LENGTH OF PROGRAM (days)
20	ALASKA HCS (Anchorage)**	0	0	NA	-38	-3,650	NA
20	BOISE, ID	25	631	25	1	-257	-12
20	PUGET SOUND (WA) HCS: American Lake	122	4,770	39	-110	-3,809	2
20	PUGET SOUND (WA) HCS: Seattle	231	3,367	15	-56	-664	1
20	ROSEBURG (OR) HCS	131	3,381	26	10	65	-2
21	HILO, HI	44	2,772	63	-46	-1,153	19
21	PALO ALTO (CA) HCS: Menlo Park	231	12,280	53	-47	-2,825	-1
22	GREATER LOS ANGELES (CA) HCS: West LA**	0	0	NA	-82	-4,703	NA
23	BLACK HILLS (SD) HCS: Hot Springs*	39	2,429	62	39	2,429	NA
23	CENTRAL IA HCS: Des Moines	47	1,718	37	-19	-662	0
23	CENTRAL IA HCS: Knoxville**	0	0	NA	-67	-6,692	NA
23	MINNEAPOLIS, MN† **	0	0	NA	-48	-4,156	NA
ALL VA		3,995	190,352	48	-2,019	-42,574	9

Note: "Length of Program" for the PTSD Day Hospitals is reported from the current fiscal year's Annual Report For PTSD Specialized Programs as "Anticipated Length of Treatment".

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

NA=Not Applicable.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

\* No Specialized Intensive PTSD program at this facility was open in the base year.

\*\* No Specialized Intensive PTSD program at this facility was open in the current fiscal year.

Table 3.5. FTEE for Specialized Outpatient PTSD Programs, by VISN, FY 2004.

VISN	FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1996
1	29.81	-6.75
2	11.73	3.53
3	26.04	5.37
4	23.03	-2.35
5	14.62	2.22
6	19.03	4.00
7	34.02	14.23
8	24.18	2.63
9	16.46	-6.82
10	36.84	29.29
11	18.18	1.71
12	11.94	-0.11
15	20.69	4.99
16	59.28	23.97
17	26.00	6.26
18	20.34	-0.75
19	13.10	-0.02
20	39.20	16.54
21	27.98	3.75
22	28.73	12.31
23	32.56	-1.66
ALL VA	533.75	112.33

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1996
1	BOSTON (MA) HCS: Boston	PCT	3.81	-0.11
1	BOSTON (MA) HCS: Boston	WSDTT	3.33	-2.32
1	BOSTON (MA) HCS: Brockton	PCT	5.06	-2.67
1	CONNECTICUT HCS: West Haven*	PCT	5.32	5.32
1	CONNECTICUT HCS: West Haven	SUPT	4.92	0.92
1	MANCHESTER, NH**	PCT	0.00	-2.50
1	PROVIDENCE, RI	PCT	5.31	-0.44
1	TOGUS, ME**	PCT	0.00	-3.10
1	WHITE RIVER JUNCTION, VT	PCT	2.05	-1.86
2	CANANDAIGUA, NY	PCT	4.70	0.50
2	SYRACUSE, NY*	PCT	3.32	3.32
2	WESTERN NY HCS: Batavia	PCT	3.71	-0.29
3	BRONX, NY	PCT	8.42	4.82
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	1.88	1.88
3	NEW JERSEY HCS: East Orange	PCT	4.87	1.03
3	NEW YORK HARBOR HCS: Brooklyn	PCT	4.89	-2.34
3	NEW YORK HARBOR HCS: New York	PCT	5.99	-0.01
4	CLARKSBURG, WV**	PCT	0.00	-3.72
4	COATESVILLE, PA	PCT	6.92	1.91
4	PHILADELPHIA, PA	PCT	6.38	1.23
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	7.07	0.57
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2.66	-2.34
5	MARYLAND HCS: Baltimore	PCT	4.35	1.49
5	MARYLAND HCS: Perry Point	PCT	3.48	0.88
5	WASHINGTON, DC	PCT	6.78	-0.16
6	ASHEVILLE, NC	PCT	2.16	0.06
6	DURHAM, NC	PCT	5.06	0.77
6	FAYETTEVILLE, NC*	PCT	2.76	2.76
6	HAMPTON, VA	PCT	5.90	1.62
6	SALISBURY, NC	PCT	3.15	-1.21
7	ATLANTA, GA	PCT	2.71	-1.19
7	AUGUSTA, GA*	PCT	12.16	12.16
7	BIRMINGHAM, AL	PCT	4.02	0.12
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	6.10	2.23
7	CHARLESTON, SC	PCT	3.01	-1.11
7	DUBLIN, GA*	PCT	6.03	6.03
7	TUSCALOOSA, AL	PCT	0.00	-4.00
8	BAY PINES, FL	PCT	10.61	5.61
8	MIAMI, FL	PCT	3.56	-0.44
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	3.99	-0.72
8	SAN JUAN, PR	PCT	4.01	0.01
8	TAMPA, FL	PCT	2.01	-1.83
9	HUNTINGTON, WV*	PCT	2.22	2.22
9	LEXINGTON, KY	PCT	3.21	-0.60
9	LOUISVILLE, KY	PCT	2.34	-2.66
9	MEMPHIS, TN	PCT	3.50	-0.50
9	MIDDLE TN HCS: Murfreesboro**	PCT	0.00	-4.00
9	MIDDLE TN HCS: Nashville**	PCT	0.00	-2.47
9	MOUNTAIN HOME, TN	PCT	5.18	1.18

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1996
10	BRECKSVILLE, OH*	PCT	13.12	13.12
10	BRECKSVILLE, OH	WSDTT	2.86	-0.89
10	CHILLICOTHE, OH	PCT	5.29	1.49
10	CINCINNATI, OH*	PCT	8.82	8.82
10	COLUMBUS, OH*	PCT	3.06	3.06
10	DAYTON, OH*	PCT	3.70	3.70
11	ANN ARBOR (MI) HCS	PCT	3.45	-1.25
11	BATTLE CREEK, MI	PCT	5.00	0.75
11	DANVILLE, IL	PCT	2.41	-1.11
11	NORTHERN IN HCS: Fort Wayne*	PCT	3.71	3.71
11	NORTHERN IN HCS: Marion	PCT	3.61	-0.39
12	CHICAGO (IL) HCS: West Side	PCT	6.49	0.79
12	HINES, IL	PCT	3.51	-0.69
12	IRON MOUNTAIN, MI**	PCT	0.00	-2.15
12	MADISON, WI*	WSDTT	1.94	1.94
15	EASTERN KS HCS: Topeka	PCT	7.02	1.81
15	KANSAS CITY, MO	PCT	3.20	-0.79
15	POPLAR BLUFF, MO	PCT	2.42	2.42
15	ST. LOUIS, MO	PCT	5.08	1.08
15	WICHITA, KS	PCT	2.97	0.47
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	5.23	5.23
16	FAYETTEVILLE, AR	PCT	3.19	-0.61
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	4.16	0.16
16	HOUSTON, TX	PCT	16.93	11.02
16	JACKSON, MS	PCT	6.77	2.47
16	MUSKOGEE, OK	PCT	3.01	3.01
16	NEW ORLEANS, LA	PCT	10.63	2.13
16	NEW ORLEANS, LA	WSDTT	1.59	-2.71
16	OKLAHOMA CITY, OK	PCT	4.99	0.49
16	SHREVEPORT, LA	PCT	2.80	2.80
17	CENTRAL TX VETERANS HCS: Austin*	PCT	5.41	5.41
17	CENTRAL TX VETERANS HCS: Temple	PCT	2.24	-0.92
17	CENTRAL TX VETERANS HCS: Waco	PCT	4.21	-0.27
17	NORTH TX HCS: Dallas	PCT	6.02	-0.28
17	SOUTH TX VETERANS HCS: San Antonio	PCT	8.13	2.33
18	EL PASO (TX) VETERANS HCS	PCT	4.11	0.11
18	NEW MEXICO HCS (Albuquerque)	PCT	8.05	1.20
18	PHOENIX, AZ	PCT	5.01	-1.36
18	SOUTHERN AZ HCS (Tucson)	PCT	3.17	-0.70
19	CHEYENNE, WY	PCT	2.11	-1.41
19	EASTERN COLORADO HCS: Denver**	PCT	0.00	-3.75
19	GRAND JUNCTION, CO	PCT	4.41	2.69
19	SALT LAKE CITY (UT) HCS	PCT	6.59	2.46
20	BOISE, ID	PCT	5.39	-0.61
20	PORTLAND, OR	PCT	8.96	4.79
20	PUGET SOUND (WA) HCS: Seattle	PCT	21.68	9.19
20	SPOKANE, WA*	PCT	3.17	3.17
21	HONOLULU, HI	PCT	5.41	0.29
21	NORTHERN CA HCS	PCT	2.81	-0.52
21	PALO ALTO (CA) HCS: San Jose	PCT	3.21	-0.19
21	SAN FRANCISCO, CA	PCT	12.53	5.15
21	SAN FRANCISCO, CA	SUPT	4.01	-0.99
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	4.13	-0.87

Table 3.6. FTEE for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004.

VISN	FACILITY	PROGRAM	FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1996
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	9.23	9.23
22	LOMA LINDA, CA	PCT	1.55	-2.45
22	LOMA LINDA, CA	WSDTT	2.56	-1.03
22	SAN DIEGO (CA) HCS CA	PCT	6.71	2.88
22	SOUTHERN NV HCS (Las Vegas)*	PCT	4.56	4.56
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4.65	-0.35
23	CENTRAL IA HCS: Knoxville*	PCT	1.43	-3.07
23	IOWA CITY, IA	PCT	3.76	-0.49
23	MINNEAPOLIS, MN	PCT	13.77	7.87
23	NE-WESTERN IA HCS: Lincoln	PCT	2.87	-0.05
23	NE-WESTERN IA HCS: Omaha	PCT	6.08	2.08
23	SIOUX FALLS, SD	PCT	0.00	-3.36
23	ST. CLOUD, MN**	PCT	0.00	-4.29
ALL VA			533.75	112.33

\* The Specialized Outpatient PTSD program at this facility was not open in the base year.

\*\* The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year.



Table 3-7. FTEE for Specialized Intensive PTSD Programs, by VISN, FY 2004.

VISN	FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1997
1	14.89	-4.83
2	2.71	-25.23
3	25.16	-20.34
4	26.14	-5.86
5	9.11	-1.62
6	31.19	-3.74
7	0.00	-67.62
8	10.38	-16.23
10	11.99	-14.06
11	13.13	-10.25
12	21.08	-8.82
15	15.26	-1.52
16	19.33	-31.39
17	21.79	5.34
18	4.21	4.21
19	7.47	-30.44
20	32.18	-12.36
21	50.61	-9.53
22		-7.89
23	7.45	-10.14
ALL VA	324.07	-272.33

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

Table 3-8. FTEE for Specialized Intensive PTSD Programs, by VA Facility, FY 2004.

VISN		FILLED FTEE FY 2004	DIFFERENCE: FILLED FTEE FY 2004 - FY 1997
1	CONNECTICUT HCS: Newington	2.67	2.67
1	CONNECTICUT HCS: West Haven	0.00	-4.87
1	NORTHAMPTON, MA	7.14	2.62
1	TOGUS, ME†	2.86	-3.32
1	WHITE RIVER JUNCTION, VT†	2.22	-1.93
2	WESTERN NY HCS: Batavia	2.71	-25.23
3	BRONX, NY**	0.00	-11.90
3	HUDSON VALLEY (NY) HCS: Montrose	13.60	-1.43
3	NEW JERSEY HCS: Lyons	11.55	-7.02
4	CLARKSBURG, WV	4.99	-3.32
4	COATESVILLE, PA	21.15	-2.55
5	MARTINSBURG, WV	6.60	-0.28
5	MARYLAND HCS: Baltimore	2.51	-1.34
6	SALEM, VA	16.17	-0.33
6	SALISBURY, NC	15.02	-3.41
7	AUGUSTA, GA**	0.00	-36.29
7	CENTRAL AL VETERANS HCS: Tuskegee**	0.00	-20.94
7	TUSCALOOSA, AL† **	0.00	-10.39
8	BAY PINES, FL	4.68	-5.19
8	MIAMI, FL	5.70	-11.04
10	BRECKSVILLE, OH	1.88	-0.92
10	CINCINNATI, OH	5.26	-9.24
10	DAYTON, OH	4.85	-3.90
11	BATTLE CREEK, MI	13.13	-10.25
12	MILWAUKEE, WI	3.51	-0.58
12	NORTH CHICAGO, IL	12.83	-3.20
12	TOMAH, WI	4.74	-5.04
15	EASTERN KS HCS: Topeka	15.26	-1.52
16	CENTRAL AR VETERANS HCS (Little Rock)	12.78	-18.62
16	JACKSON, MS	2.41	-3.56
16	NEW ORLEANS, LA	4.14	-9.21
17	CENTRAL TX VETERANS HCS: Waco	21.79	5.34
18	SOUTHERN AZ HCS (Tucson)*	4.21	4.21
19	EASTERN COLORADO HCS: Denver	7.47	-24.46
19	SHERIDAN, WY**	0.00	-5.98
20	ALASKA HCS (Anchorage)**	0.00	-3.38
20	BOISE, ID	3.26	-0.90
20	PUGET SOUND (WA) HCS: American Lake	9.45	1.29
20	PUGET SOUND (WA) HCS: Seattle	13.88	-1.47
20	ROSEBURG (OR) HCS	5.59	-7.91
21	HILO, HI	13.74	-1.32
21	PALO ALTO (CA) HCS: Menlo Park	36.87	-8.22
22	GREATER LOS ANGELES (CA) HCS: West LA**	0.00	-7.89
23	BLACK HILLS (SD) HCS: Hot Springs*	4.67	4.67
23	CENTRAL IA HCS: Des Moines	2.79	-1.61
23	CENTRAL IA HCS: Knoxville**	0.00	-8.81
23	MINNEAPOLIS, MN† **	0.00	-4.38
ALL VA		324.07	-272.33

Note: No Specialized Intensive Program was located in VISN 9 for these fiscal years.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

\*No Specialized Intensive PTSD program at this facility was open in the base year.

\*\* No Specialized Intensive PTSD program at this facility was open in the current year.

Table 3-9. Costs for Outpatient Specialized PTSD Programs, by VISN, FY 2004.

VISN	FY 2004					DIFF: FY 2004 -FY 1996		
	# VISITS	# VETERANS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
1	43,519	3,434	\$3,270,908	\$75	\$953	\$530,084	-\$3	-\$199
2	12,468	1,041	\$1,080,587	\$87	\$1,038	\$517,385	\$9	-\$309
3	46,496	2,975	\$2,801,523	\$60	\$942	\$1,166,592	-\$17	-\$593
4	30,353	2,700	\$2,526,683	\$83	\$936	\$655,917	-\$6	-\$425
5	21,876	1,600	\$1,312,460	\$60	\$820	\$593,697	\$5	-\$139
6	27,602	3,064	\$1,761,847	\$64	\$575	\$723,979	-\$5	-\$159
7	42,293	3,513	\$3,501,539	\$83	\$997	\$2,044,567	-\$4	-\$241
8	30,279	2,916	\$2,504,330	\$83	\$859	\$954,959	-\$5	-\$444
9	19,025	2,157	\$1,617,600	\$85	\$750	-\$71,944	-\$46	-\$607
10	29,254	2,605	\$3,555,468	\$122	\$1,365	\$3,032,463	\$26	\$431
11	17,110	1,634	\$1,489,540	\$87	\$912	\$403,689	-\$13	-\$123
12	14,320	1,036	\$1,236,523	\$86	\$1,194	\$354,413	\$10	-\$106
15	30,228	2,353	\$1,982,355	\$66	\$842	\$749,283	-\$1	-\$244
16	98,875	8,884	\$6,518,547	\$66	\$734	\$3,825,952	-\$3	-\$159
17	29,624	2,754	\$2,186,295	\$74	\$794	\$681,544	\$0	-\$349
18	32,021	3,306	\$2,126,513	\$66	\$643	\$583,457	-\$3	-\$305
19	11,009	1,177	\$1,418,630	\$129	\$1,205	\$391,780	\$41	\$94
20	53,291	4,671	\$3,699,116	\$69	\$792	\$2,062,360	-\$5	-\$316
21	34,537	2,378	\$3,263,598	\$94	\$1,372	\$1,236,749	-\$8	-\$260
22	44,424	3,526	\$2,969,977	\$67	\$842	\$1,645,870	-\$22	-\$1,017
23	26,813	2,472	\$3,151,737	\$118	\$1,275	\$482,590	\$32	-\$89
ALL VA	695,417	60,160	\$53,975,776	\$78	\$897	\$22,565,386	-\$3	-\$286

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004

VISN	FACILITY	PROGRAM	FY 2004					DIFF: FY 2004 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
1	BOSTON (MA) HCS: Boston	PCT	6,561	479	\$443,713	\$68	\$926	\$21,495	-\$45	-\$453
1	BOSTON (MA) HCS: Boston	WSDTT	3,752	227	\$358,726	\$96	\$1,580	\$75,489	-\$4	-\$271
1	BOSTON (MA) HCS: Brockton	PCT	6,681	542	\$481,156	\$72	\$888	-\$92,329	-\$2	\$52
1	CONNECTICUT HCS: West Haven*	PCT	8,624	688	\$586,048	\$68	\$852	\$586,048	NA	NA
1	CONNECTICUT HCS: West Haven	SUPT	3,288	311	\$546,452	\$166	\$1,757	\$196,039	\$50	-\$49
1	MANCHESTER, NH**	PCT	NA	NA	\$0	NA	NA	-\$175,285	NA	NA
1	PROVIDENCE, RI	PCT	11,965	1,022	\$613,044	\$51	\$600	\$192,085	-\$9	-\$285
1	TOGUS, ME**	PCT	NA	NA	\$0	NA	NA	-\$212,964	NA	NA
1	WHITE RIVER JUNCTION, VT	PCT	2,648	339	\$241,769	\$91	\$713	-\$60,494	\$14	-\$56
2	CANANDAIGUA, NY	PCT	6,210	450	\$435,558	\$70	\$968	\$170,725	\$3	-\$247
2	SYRACUSE, NY*	PCT	2,930	302	\$361,934	\$124	\$1,198	\$361,934	NA	NA
2	WESTERN NY HCS: Batavia	PCT	3,328	296	\$283,095	\$85	\$956	-\$15,274	-\$5	-\$22
3	BRONX, NY	PCT	11,597	496	\$921,157	\$79	\$1,857	\$615,865	\$35	\$410
3	HUDSON VALLEY (NY) HCS: Castle Point*	PCT	4,638	322	\$174,729	\$38	\$543	\$174,729	NA	NA
3	NEW JERSEY HCS: East Orange	PCT	9,653	656	\$501,141	\$52	\$764	\$177,394	-\$169	-\$2,101
3	NEW YORK HARBOR HCS: Brooklyn	PCT	10,200	850	\$509,725	\$50	\$600	-\$5,951	\$3	-\$451
3	NEW YORK HARBOR HCS: New York	PCT	10,408	671	\$694,770	\$67	\$1,035	\$204,554	-\$185	-\$982
4	CLARKSBURG, WV**	PCT	NA	NA	\$0	NA	NA	-\$250,539	NA	NA
4	COATESVILLE, PA	PCT	9,993	724	\$710,582	\$71	\$981	\$311,467	-\$8	-\$94
4	PHILADELPHIA, PA	PCT	11,759	1,095	\$779,327	\$66	\$712	\$377,277	-\$15	-\$117
4	PITTSBURGH (PA) HCS: Highland Drive	PCT	6,397	711	\$782,127	\$122	\$1,100	\$328,947	\$24	\$108
4	PITTSBURGH (PA) HCS: Highland Drive	SUPT	2,204	192	\$254,647	\$116	\$1,326	-\$111,235	-\$54	-\$764
5	MARYLAND HCS: Baltimore	PCT	5,837	567	\$424,409	\$73	\$749	\$207,200	\$17	-\$36
5	MARYLAND HCS: Perry Point	PCT	4,014	243	\$347,529	\$87	\$1,430	\$170,488	\$17	\$488
5	WASHINGTON, DC	PCT	12,025	853	\$540,522	\$45	\$634	\$216,009	-\$5	-\$478
6	ASHEVILLE, NC	PCT	3,354	254	\$211,792	\$63	\$834	\$81,015	-\$40	-\$366
6	DURHAM, NC	PCT	4,757	770	\$474,880	\$100	\$617	\$190,937	\$25	\$40
6	FAYETTEVILLE, NC*	PCT	5,299	299	\$192,414	\$36	\$644	\$192,414	NA	NA
6	HAMPTON, VA	PCT	10,064	1,086	\$485,040	\$48	\$447	\$227,641	\$7	-\$61
6	SALISBURY, NC	PCT	4,128	663	\$397,720	\$96	\$600	\$31,971	\$1	-\$611
7	ATLANTA, GA	PCT	6,900	453	\$335,423	\$49	\$740	\$45,548	-\$23	-\$674
7	AUGUSTA, GA*	PCT	11,565	1,036	\$1,251,997	\$108	\$1,208	\$1,251,997	NA	NA
7	BIRMINGHAM, AL	PCT	6,437	691	\$571,096	\$89	\$826	\$280,378	-\$8	-\$54
7	CENTRAL AL VETERANS HCS: Tuskegee	PCT	5,853	439	\$438,355	\$75	\$999	\$224,201	-\$1	\$16
7	CHARLESTON, SC	PCT	3,985	466	\$403,190	\$101	\$865	\$67,517	-\$7	-\$321
7	DUBLIN, GA*	PCT	7,553	441	\$501,479	\$66	\$1,137	\$501,479	NA	NA
7	TUSCALOOSA, AL**	PCT	NA	NA	\$0	NA	NA	-\$326,552	NA	NA
8	BAY PINES, FL	PCT	9,607	960	\$1,049,996	\$109	\$1,094	\$692,303	-\$1	-\$547
8	MIAMI, FL	PCT	4,837	380	\$381,551	\$79	\$1,004	\$50,336	-\$24	-\$1,219
8	NO.FL/SO.GA VETERANS HCS: Gainesville	PCT	5,331	388	\$373,457	\$70	\$963	\$66,647	-\$51	-\$801
8	SAN JUAN, PR	PCT	3,193	440	\$407,748	\$128	\$927	\$122,841	\$52	\$171
8	TAMPA, FL	PCT	7,311	752	\$291,580	\$40	\$388	\$22,834	-\$14	-\$679

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004

VISN	FACILITY	PROGRAM	FY 2004					DIFF: FY 2004 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
9	HUNTINGTON, WV*	PCT	1,218	217	\$204,473	\$168	\$942	\$204,473	NA	NA
9	LEXINGTON, KY	PCT	5,698	285	\$304,659	\$53	\$1,069	\$35,102	-\$203	-\$616
9	LOUISVILLE, KY	PCT	1,716	332	\$207,363	\$121	\$625	-\$86,027	-\$51	-\$779
9	MEMPHIS, TN	PCT	4,654	539	\$318,903	\$69	\$592	\$4,989	-\$7	-\$448
9	MIDDLE TN HCS: Murfreesboro**	PCT	NA	NA	\$0	NA	NA	-\$279,384	NA	NA
9	MIDDLE TN HCS: Nashville**	PCT	NA	NA	\$0	NA	NA	-\$212,864	NA	NA
9	MOUNTAIN HOME, TN	PCT	5,739	784	\$582,202	\$101	\$743	\$261,767	\$14	-\$8
10	BRECKSVILLE, OH*	PCT	11,119	624	\$1,214,949	\$109	\$1,947	\$1,214,949	NA	NA
10	BRECKSVILLE, OH	WSDTT	871	99	\$265,825	\$305	\$2,685	\$43,836	\$179	\$1,262
10	CHILLICOTHE, OH	PCT	4,111	697	\$532,427	\$130	\$764	\$231,411	\$49	\$59
10	CINCINNATI, OH*	PCT	6,608	573	\$801,748	\$121	\$1,399	\$801,748	NA	NA
10	COLUMBUS, OH*	PCT	2,775	300	\$356,609	\$129	\$1,189	\$356,609	NA	NA
10	DAYTON, OH*	PCT	3,770	384	\$383,909	\$102	\$1,000	\$383,909	NA	NA
11	ANN ARBOR (MI) HCS	PCT	3,370	258	\$342,102	\$102	\$1,326	\$30,995	-\$26	-\$537
11	BATTLE CREEK, MI	PCT	6,407	629	\$408,301	\$64	\$649	\$80,940	-\$37	-\$343
11	DANVILLE, IL	PCT	2,500	298	\$185,886	\$74	\$624	\$941	\$1	-\$72
11	NORTHERN IN HCS: Fort Wayne*	PCT	1,548	172	\$269,879	\$174	\$1,569	\$269,879	NA	NA
11	NORTHERN IN HCS: Marion	PCT	3,285	300	\$283,371	\$86	\$945	\$20,933	-\$13	\$33
12	CHICAGO (IL) HCS: West Side	PCT	10,513	547	\$668,790	\$64	\$1,223	\$250,209	\$5	-\$299
12	HINES, IL	PCT	2,425	308	\$359,585	\$148	\$1,167	\$27,389	\$36	-\$469
12	IRON MOUNTAIN, MI**	PCT	NA	NA	\$0	NA	NA	-\$131,333	NA	NA
12	MADISON, WI*	WSDTT	1,382	181	\$208,148	\$151	\$1,150	\$208,148	NA	NA
15	EASTERN KS HCS: Topeka	PCT	8,353	421	\$673,329	\$81	\$1,599	\$255,501	\$28	\$580
15	KANSAS CITY, MO	PCT	5,593	569	\$312,607	\$56	\$549	-\$14,412	-\$48	-\$879
15	POPLAR BLUFF, MO*	PCT	2,432	396	\$205,865	\$85	\$520	\$205,865	NA	NA
15	ST. LOUIS, MO	PCT	9,045	756	\$561,427	\$62	\$743	\$256,411	-\$31	-\$335
15	WICHITA, KS	PCT	4,805	212	\$229,126	\$48	\$1,081	\$45,917	\$5	\$333
16	CENTRAL AR VETERANS HCS (Little Rock)*	PCT	9,073	1,204	\$530,564	\$58	\$441	\$530,564	NA	NA
16	FAYETTEVILLE, AR	PCT	3,694	632	\$309,381	\$84	\$490	\$3,705	-\$43	-\$313
16	GULF COAST (MS) VETERANS HCS (Biloxi)	PCT	9,830	753	\$527,604	\$54	\$701	\$255,604	-\$8	\$62
16	HOUSTON, TX	PCT	23,395	2,100	\$2,155,618	\$92	\$1,026	\$1,690,342	\$41	\$297
16	JACKSON, MS	PCT	6,261	912	\$664,426	\$106	\$729	\$307,058	\$11	-\$406
16	MUSKOGEE, OK*	PCT	8,387	769	\$359,713	\$43	\$468	\$359,713	NA	NA
16	NEW ORLEANS, LA	PCT	26,069	1,816	\$1,105,709	\$42	\$609	\$507,100	-\$12	-\$19
16	NEW ORLEANS, LA	WSDTT	806	82	\$144,704	\$180	\$1,765	-\$211,779	-\$49	-\$565
16	OKLAHOMA CITY, OK	PCT	9,366	501	\$496,534	\$53	\$991	\$159,351	\$3	\$129
16	SHREVEPORT, LA*	PCT	1,994	204	\$224,294	\$112	\$1,099	\$224,294	NA	NA
17	CENTRAL TX VETERANS HCS: Austin*	PCT	4,791	400	\$448,344	\$94	\$1,121	\$448,344	NA	NA
17	CENTRAL TX VETERANS HCS: Temple	PCT	2,764	286	\$159,456	\$58	\$558	-\$193,565	-\$68	-\$2,117
17	CENTRAL TX VETERANS HCS: Waco	PCT	4,264	305	\$311,918	\$73	\$1,023	\$46,693	\$22	\$175
17	NORTH TX HCS: Dallas	PCT	7,934	410	\$589,200	\$74	\$1,437	\$100,679	-\$5	\$106
17	SOUTH TX VETERANS HCS: San Antonio	PCT	9,871	1,375	\$677,377	\$69	\$493	\$279,393	\$3	-\$280

Table 3.10 Costs for Specialized Outpatient PTSD Programs, by Individual Program, FY 2004

VISN	FACILITY	PROGRAM	FY 2004					DIFF: FY 2004 - FY 1996		
			# VISITS	# VETS TREATED	DIRECT COST	COST PER VISIT	COST PER CAPITA	DIRECT COST	COST PER VISIT	COST PER CAPITA
18	EL PASO (TX) VETERANS HCS	PCT	6,615	615	\$437,974	\$66	\$712	\$141,119	\$24	\$133
18	NEW MEXICO HCS (Albuquerque)	PCT	12,134	1,413	\$839,790	\$69	\$594	\$353,550	-\$2	-\$595
18	PHOENIX, AZ	PCT	7,310	608	\$529,649	\$72	\$871	\$85,736	-\$24	-\$474
18	SOUTHERN AZ HCS (Tucson)	PCT	5,962	674	\$319,101	\$54	\$473	\$3,053	-\$27	-\$390
19	CHEYENNE, WY	PCT	2,040	206	\$195,171	\$96	\$947	-\$58,976	-\$4	\$30
19	EASTERN COLORADO HCS: Denver**	PCT	NA	NA	\$0	NA	NA	-\$284,084	NA	NA
19	GRAND JUNCTION, CO	PCT	264	33	\$449,743	\$1,704	\$13,629	\$275,919	\$1,552	\$11,799
19	SALT LAKE CITY (UT) HCS	PCT	8,705	938	\$773,716	\$89	\$825	\$458,921	\$21	-\$204
20	BOISE, ID	PCT	3,216	267	\$518,917	\$161	\$1,944	\$70,567	\$66	\$776
20	PORTLAND, OR	PCT	9,648	932	\$877,127	\$91	\$941	\$537,923	-\$7	-\$197
20	PUGET SOUND (WA) HCS: Seattle	PCT	36,774	3,166	\$2,059,950	\$56	\$651	\$1,210,748	-\$6	-\$131
20	SPOKANE, WA*	PCT	3,653	346	\$243,122	\$67	\$703	\$243,122	NA	NA
21	HONOLULU, HI	PCT	7,543	376	\$580,137	\$77	\$1,543	\$235,621	-\$13	\$308
21	NORTHERN CA HCS	PCT	1,600	245	\$274,873	\$172	\$1,122	\$63,825	\$88	\$452
21	PALO ALTO (CA) HCS: San Jose	PCT	8,197	553	\$250,689	\$31	\$453	-\$46,275	-\$57	-\$805
21	SAN FRANCISCO, CA	PCT	13,609	1,111	\$1,718,216	\$126	\$1,547	\$919,011	-\$1	\$239
21	SAN FRANCISCO, CA	SUPT	3,588	114	\$439,683	\$123	\$3,857	\$64,567	\$25	\$1,099
22	GREATER LOS ANGELES (CA) HCS: East LA	PCT	6,176	501	\$456,678	\$74	\$912	\$56,011	-\$3	-\$168
22	GREATER LOS ANGELES (CA) HCS: West LA*	PCT	6,923	541	\$904,297	\$131	\$1,672	\$904,297	NA	NA
22	LOMA LINDA, CA	PCT	4,049	258	\$161,634	\$40	\$626	-\$167,530	-\$69	-\$1,079
22	LOMA LINDA, CA	WSDTT	1,815	182	\$290,041	\$160	\$1,594	\$32,440	\$35	-\$686
22	SAN DIEGO (CA) HCS CA	PCT	17,211	1,353	\$703,407	\$41	\$520	\$366,732	-\$33	-\$265
22	SOUTHERN NV HCS (Las Vegas)*	PCT	8,250	708	\$453,920	\$55	\$641	\$453,920	NA	NA
23	BLACK HILLS (SD) HCS: Fort Meade	SUPT	4,518	345	\$455,722	\$101	\$1,321	\$127,460	\$21	-\$257
23	CENTRAL IA HCS: Knoxville	PCT	2,465	160	\$116,432	\$47	\$728	-\$294,613	-\$46	-\$891
23	IOWA CITY, IA	PCT	2,559	338	\$422,114	\$165	\$1,249	\$86,175	\$77	\$466
23	MINNEAPOLIS, MN	PCT	10,099	993	\$1,288,270	\$128	\$1,297	\$770,667	\$58	\$219
23	NE-WESTERN IA HCS: Lincoln	PCT	2,423	229	\$290,192	\$120	\$1,267	-\$15,458	-\$16	-\$916
23	NE-WESTERN IA HCS: Omaha	PCT	4,749	412	\$579,006	\$122	\$1,405	\$300,789	\$14	-\$261
23	SIOUX FALLS, SD**	PCT	NA	NA	\$0	NA	NA	-\$186,864	NA	NA
23	ST. CLOUD, MN**	PCT	NA	NA	\$0	NA	NA	-\$305,567	NA	NA
ALL VA			695,417	60,160	\$53,975,776	\$78	\$897	\$22,565,386	-\$3	-\$286

Note: Direct Costs are All Other Dollars plus total Personal Dollars

NA=Not applicable.

\* The Specialized Outpatient PTSD program at this facility was not open in the base year

\*\* The Specialized Outpatient PTSD program at this facility was closed for all of the current fiscal year

Table 3-11. Costs for Specialized Intensive PTSD Programs, by VISN, FY 2004.

VISN	FY 2004					DIFFERENCE: FY 2004- FY1997		
	# OF DAYS OF TREATMENT	# OF ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
1	8,759	367	\$1,199,450	\$137	\$3,268	-\$70,900	\$51	\$244
2	2,395	90	\$248,333	\$104	\$2,759	-\$1,015,419	-\$216	-\$2,506
3	12,340	258	\$2,015,030	\$163	\$7,810	-\$881,781	\$11	\$2,271
4	13,752	201	\$1,964,036	\$143	\$9,771	\$148,954	\$27	\$4,944
5	16,134	254	\$735,668	\$46	\$2,896	\$39,811	-\$25	-\$183
6	8,727	247	\$2,169,977	\$249	\$8,785	\$215,175	\$32	\$537
7**	0	0	\$0	NA	NA	-\$3,890,305	NA	NA
8	8,817	165	\$998,606	\$113	\$6,052	-\$533,277	-\$82	-\$5,129
10	3,682	122	\$1,058,027	\$287	\$8,672	-\$416,302	\$157	\$1,878
11	8,382	341	\$996,370	\$119	\$2,922	-\$317,286	-\$34	-\$1,546
12	17,051	345	\$1,647,635	\$97	\$4,776	-\$6,342	-\$4	\$672
15	4,262	100	\$1,137,156	\$267	\$11,372	\$215,677	\$183	\$3,070
16	40,059	285	\$1,459,216	\$36	\$5,120	-\$1,715,066	-\$216	-\$3,413
17	9,834	135	\$1,431,190	\$146	\$10,601	\$605,754	\$30	\$4,203
18*	1,396	81	\$361,117	\$259	\$4,458	\$361,117	NA	NA
19	3,414	134	\$652,102	\$191	\$4,866	-\$1,337,814	-\$36	-\$5,890
20	12,149	509	\$2,612,366	\$215	\$5,132	-\$196,193	\$78	\$1,132
21	15,052	275	\$4,647,762	\$309	\$16,901	\$1,185,297	\$127	\$7,492
22**	0	0	\$0	NA	NA	-\$656,952	NA	NA
23	4,147	86	\$539,555	\$130	\$6,274	-\$495,829	\$52	\$554
ALL VA	190,352	3,995	\$25,873,598	\$136	\$6,476	-\$8,761,682	-\$13	\$717

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

NA=Not applicable.

\* No Specialized Intensive PTSD program in this VISN was open in the base year.

\*\* No Specialized Intensive PTSD program in this VISN was open in the current fiscal year.

Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2004.

VISN	FACILITY	FY 2004					DIFFERENCE: FY 2004 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
1	CONNECTICUT HCS: Newington	2,155	22	\$198,646	\$92	\$9,029	-\$66,375	\$15	\$3,268
1	NORTHAMPTON, MA	4,573	71	\$567,869	\$124	\$7,998	\$313,824	\$88	\$5,667
1	TOGUS, ME†	1,345	214	\$251,341	\$187	\$1,174	-\$175,888	\$75	-\$1,062
1	WHITE RIVER JUNCTION, VT†	686	60	\$181,594	\$265	\$3,027	-\$142,461	-\$268	-\$1,353
2	WESTERN NY HCS: Batavia	2,395	90	\$248,333	\$104	\$2,759	-\$1,015,419	-\$216	-\$2,506
3	BRONX, NY**	0	0	\$0	NA	NA	-\$752,094	NA	NA
3	HUDSON VALLEY (NY) HCS: Montrose	6,228	125	\$1,038,850	\$167	\$8,311	\$120,990	\$29	\$3,212
3	NEW JERSEY HCS: Lyons	6,112	133	\$976,180	\$160	\$7,340	-\$250,678	\$28	\$1,112
4	CLARKSBURG, WV	2,896	58	\$396,762	\$137	\$6,841	-\$89,997	-\$136	\$3,460
4	COATESVILLE, PA	10,856	143	\$1,567,274	\$144	\$10,960	\$238,951	\$48	\$5,234
5	MARTINSBURG, WV	14,609	149	\$496,870	\$34	\$3,335	\$91,381	-\$12	\$38
5	MARYLAND HCS: Baltimore	1,525	105	\$238,798	\$157	\$2,274	-\$51,569	-\$125	-\$545
6	SALEM, VA	3,809	119	\$1,085,383	\$285	\$9,121	\$202,238	\$69	\$1,573
6	SALISBURY, NC	4,918	128	\$1,084,594	\$221	\$8,473	\$12,937	\$3	-\$457
7	AUGUSTA, GA**	0	0	\$0	NA	NA	-\$2,224,614	NA	NA
7	CENTRAL AL VETERANS HCS: Tuskegee**	0	0	\$0	NA	NA	-\$993,109	NA	NA
7	TUSCALOOSA, AL† **	0	0	\$0	NA	NA	-\$672,583	NA	NA
8	BAY PINES, FL	3,683	101	\$432,986	\$118	\$4,287	-\$146,685	-\$46	-\$3,340
8	MIAMI, FL	5,134	64	\$565,619	\$110	\$8,838	-\$386,592	-\$111	-\$6,772
10	BRECKSVILLE, OH	399	23	\$177,792	\$446	\$7,730	-\$37,533	\$382	\$3,244
10	CINCINNCTI, OH	649	54	\$485,447	\$748	\$8,990	-\$337,464	\$522	\$1,226
10	DAYTON, OH	2,634	45	\$394,788	\$150	\$8,773	-\$41,304	\$48	\$1,851
11	BATTLE CREEK, MI	8,382	341	\$996,370	\$119	\$2,922	-\$317,286	-\$34	-\$1,546
12	MILWAUKEE, WI	6,577	40	\$295,063	\$45	\$7,377	\$45,000	-\$4	-\$6,516
12	NORTH CHICAGO, IL	7,200	235	\$1,043,549	\$145	\$4,441	\$122,356	\$30	\$1,091
12	TOMAH, WI	3,274	70	\$309,023	\$94	\$4,415	-\$173,698	-\$51	\$26
15	EASTERN KS HCS: Topeka	4,262	100	\$1,137,156	\$267	\$11,372	\$215,677	\$183	\$3,070
16	CENTRAL AR VETERANS HCS (Little Rock)	35,421	164	\$855,546	\$24	\$5,217	-\$1,074,670	-\$224	-\$7,825
16	JACKSON, MS	2,410	58	\$210,488	\$87	\$3,629	-\$193,941	-\$87	\$394
16	NEW ORLEANS, LA	2,228	63	\$393,182	\$176	\$6,241	-\$446,455	-\$159	-\$2,240
17	CENTRAL TX VETERANS HCS: Waco	9,834	135	\$1,431,190	\$146	\$10,601	\$605,754	\$30	\$4,203
18	SOUTHERN AZ HCS (Tucson)*	1,396	81	\$361,117	\$259	\$4,458	\$361,117	NA	NA
19	DENVER, CO	3,414	134	\$652,102	\$191	\$4,866	-\$963,818	-\$97	-\$9,691
19	SHERIDAN, WY**	0	0	\$0	NA	NA	-\$373,996	NA	NA
20	ALASKA HCS (Anchorage)**	0	0	\$0	NA	NA	-\$286,628	NA	NA
20	BOISE, ID	631	25	\$412,143	\$653	\$16,486	\$45,524	\$240	\$1,210
20	PUGET SOUND (WA) HCS: American Lake	4,770	122	\$625,025	\$131	\$5,123	\$188,206	\$80	\$3,240
20	PUGET SOUND (WA) HCS: Seattle	3,367	231	\$1,171,528	\$348	\$5,072	\$195,444	\$106	\$1,671
20	ROSEBURG (OR) HCS	3,381	131	\$403,671	\$119	\$3,081	-\$338,740	-\$104	-\$3,054
21	HILO, HI	2,772	44	\$985,132	\$355	\$22,389	\$224,122	\$161	\$13,934
21	PALO ALTO (CA) HCS: Menlo Park	12,280	231	\$3,662,630	\$298	\$15,856	\$961,175	\$119	\$6,138



Table 3-12. Costs for Specialized Intensive PTSD Programs, by VA Facility, FY 2004.

VISN	FACILITY		FY 2004				DIFFERENCE: FY 2004 - FY 1997		
		#Of DAYS OF TREATMENT	# Of ADMISSIONS	DIRECT COSTS	COST PER DIEM	COST PER CAPITA	DIRECT COSTS	COST PER DIEM	COST PER CAPITA
22	GREATER LOS ANGELES (CA) HCS: West LA **	0	0	\$0	NA	NA	-\$656,952	NA	NA
23	BLACK HILLS (SD) HCS: Hot Springs*	2,429	39	\$332,792	\$137	\$8,533	\$332,792	NA	NA
23	CENTRAL IA HCS: Des Moines	1,718	47	\$206,763	\$120	\$4,399	-\$118,602	-\$16	-\$531
23	CENTRAL IA HCS: Knoxville**	0	0	\$0	NA	NA	-\$398,541	NA	NA
23	MINNEAPOLIS, MN† **	0	0	\$0	NA	NA	-\$311,479	NA	NA
ALL VA		190,352	3,995	\$25,873,598	\$136	\$6,476	-\$8,761,682	-\$13	\$717

Note: Direct Costs are All Other Dollars plus total Personal Dollars.

NA=Not applicable.

† For this facility FY 1998 data were used as baseline for computing differences, because FY 1997 data were missing for one or more components.

\* No Specialized Intensive PTSD program at this facility was open in the base year.

\*\* No Specialized Intensive PTSD program at this facility was open in the current fiscal year.



#### **PART IV: OUTCOME MONITORING OF SPECIALIZED INTENSIVE PTSD PROGRAMS**

System-wide monitoring of health care outcomes has become an increasingly prominent feature of health care delivery in America, and will eventually constitute a cornerstone of the operation of the Department of Veterans Affairs health care system (Kizer, 1995, 1996; Veterans Health Administration, 1996). As our health care system has undergone a period of accelerating and unprecedented change, public officials, health care professionals, and the public have demanded objective evidence of the continuing quality and value of the care provided. Although controversial, health care “report cards” have been developed (and made public) by an increasing number of health care systems. The treatment of veterans suffering from Posttraumatic Stress Disorder (PTSD) due to their military experience is one of the highest VA priorities. In an earlier report (Fontana & Rosenheck, 1997b), we described our development of a report card for the treatment outcomes of the specialized intensive PTSD programs (SIPPs), as specified in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. Readers who are interested in the technical aspects of the development of the report card should consult this earlier report (Fontana & Rosenheck, 1997b).

VISNs have been very active since FY 1996 in opening, closing and redesigning their intensive PTSD programs. At the same time, there has been increased interest in VA in comparing performance during the most recent fiscal year to a reference year. We use FY 1996 as the reference year for all outcome indices except Work. Due to a change in the assessment of Work from dollars earned to days worked, the earliest that we have data available for the latter measure is FY 1998. FY 1998, therefore, becomes the reference year for days worked. Similarly, we began collecting data concerning veterans’ satisfaction with their treatment in FY 1997. That fiscal year, therefore, becomes the reference year for satisfaction.

The changes in program design have made it infeasible for us to continue to compare performance across fiscal years at the program level. Beginning with the Long Journey Home VII report (Fontana, Rosenheck et al., 1999), therefore, we shifted our presentation of performance data from the program level to the station level. We continue to present performance data at the VISN level, however, as in the past. There was a reorganization of VISNs in FY 2002 such that VISNs 13 and 14 were consolidated and their designation changed to VISN 23.

In response to requests from the field, we continue to present the baseline and follow-up means in addition to the risk-adjusted follow-up means for the current fiscal year for each station and VISN. We hope that this expanded presentation of the outcome data to include baseline and follow-up means enhances their utility for program planning.

In the sections that follow we describe the: (1) programs and time-period surveyed, (2) the stations surveyed and the adequacy of the data collected, (3) conditioning of the data to remove unwanted artifacts, (4) methods of risk-adjustment, (5) definition of the specific measures of outcome and the significance of these outcomes nationwide, (6) patient satisfaction

with specialized PTSD treatment nationwide, (7) identification of stations whose outcomes or satisfaction are significantly better or worse than average, (8) deriving a report card for outcomes by synthesizing several indices into a single index, and (9) limitations to the monitoring methodology and data.

### ***Programs and Time-Period Surveyed***

The monitoring protocol covers all *intensive* specialized PTSD programs: inpatient, residential and day hospitals (outpatient). The types of residential and inpatient programs that are included are the Evaluation and Brief Treatment PTSD Units (EBTPUs), PTSD Residential Rehabilitation Programs (PRRPs), PTSD Domiciliary Programs (PDPs) and Specialized Inpatient PTSD Units (SIPUs), including a Women's Trauma Recovery Program. More detailed descriptions of these programs can be found in previous NEPEC reports (Fontana, Rosenheck et al., 1993, 1995). Another change that we instituted in the Long Journey Home VII and subsequent reports is the definition of the time-period surveyed. In order to represent performance most accurately within a given fiscal year, we define the relevant performance to consist of clinical *outcomes* that occurred during the index fiscal year. The veterans comprising the sample for this report, therefore, are those whose four-month follow-up assessment after discharge was due during FY 2004. In all, there were 3,171 veterans who were enrolled in the monitoring protocol and were due for follow-up during FY 2004. Of these, 2,527 (80%) were actually followed-up.

### ***Stations Surveyed and Adequacy of Data Collection***

A total of 37 stations were surveyed. Confidence in conclusions drawn from our analyses rests upon the representativeness of the data upon which they are based. Representativeness is determined by the percentage of veterans who are followed up. The Special Emphasis Program goal for representativeness is a minimum of a 50% follow-up (VHA Directive 96-051, Program Measure #1). The number due for follow-up, the number actually followed up, and the percentage followed up are presented in Table 4-1 for each station. In FY 2004, all 37 stations met the minimum goal of 50% and, therefore, were retained for analyses of outcomes and satisfaction.

### ***Conditioning the Data***

Several procedures are in place to ensure that the data are maximally complete and accurate. The first step for a program new to the monitoring protocol is to designate one person (an evaluation director) who has overall responsibility for the implementation and ongoing operation of the protocol by program staff, and another person (a data manager) who has daily responsibility for the data collection and the submission of data to NEPEC. Each of these persons is sent a written manual describing the evaluation procedures, and the manual is

reviewed with them orally by a member of the NEPEC staff. When data are submitted to NEPEC, they are put through a series of computerized screens for accuracy of answers and for timeliness of submission. Letters explaining errors and identifying overdue forms are mailed to the data manager of each program each week. NEPEC staff edits the data with the correct information as they are returned by the field staff. In order to maximize the quality and quantity of data, NEPEC staff follow up these letters with telephone calls to data managers and evaluation directors as needed. In cases where problems in participation in the monitoring protocol persist, letters detailing the problems are sent to medical center and/or VISN authorities requesting their assistance.

### ***Correcting for Regression to the Mean***

Once the data have been made maximally complete and accurate, one other step is necessary to condition them for analysis. Regression to the mean is one of the artifacts potentially affecting longitudinal data. Regression to the mean refers to the fact that scores at time 1 are often found to be closer to the mean at time 2, due to the less than perfect test-retest reliability of the measuring instrument. In situations where people start out more deviantly than the norm (as is most often the case with psychiatric patients entering treatment), some of the movement toward the norm over time may be due to regression to the mean rather than to the treatment programs themselves. Data can be examined to determine if substantial regression to the mean has occurred by correlating the scores at time 1 with the change from time 1 to time 2. If the correlation is statistically significant, substantial regression to the mean has occurred (cf., Speer, 1992). Examination of the monitoring data in this manner reveal that they are affected by regression to the mean. We remove the component of change attributable to regression to the mean, therefore, by transforming raw scores into “true scores” using the method of Jacobson & Truax (1991). True scores are derived by adjusting raw scores for the test-retest reliability of the measuring instrument according to the formula

$$T_j = \text{Rel}(X_j) + (1 - \text{Rel})M$$

where T represents the true score, Rel is the test-retest reliability, X is the raw score, and M is the mean.

Values for the test-retest reliabilities were obtained from an earlier study of specialized outpatient treatment for PTSD (Fontana & Rosenheck, 1996b). In that study, a stabilization period of symptoms and social functioning was observed beginning four months after the initiation of treatment. The correlations across a four-month interval during this period of no change in the levels of symptoms or social functioning were used as the test-retest reliabilities. All analyses were performed on true scores, thereby maximizing the sensitivity of the analyses to programmatically induced change.

### ***Determining the Quality of Outcomes***

VHA Directive 96-051 specifies outcome goals for PTSD, substance abuse, and work in Population Measures 1, 2 and 3. We have introduced some technical modifications to the determination of whether these goals are met so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997). In addition, we have added violence as Population Measure 6, because it is the single most important disruption to social functioning. These changes have been instituted with the approval of the Clinical Quality Improvement Specialist in the Office of Performance and Quality, VA Headquarters.

As with the vast majority of medical conditions, absolute outcome standards have not been established for the treatment of PTSD. In the absence of such standards, we use the performance of the median VISN and median station nationwide as the reference point for evaluating the performance of the other VISNs and stations. For each clinical outcome and patient satisfaction, the risk-adjusted value for the median VISN or station is adopted as the reference point. The SEP goal for each measure of clinical outcome is that the outcome not be significantly worse than that of the median, or reference, VISN or station.

### ***Risk Adjustment***

A major challenge for all outcome monitoring efforts is posed by the inevitable differences among veterans treated at various stations at the time of admission. Such differences in sociodemographic and clinical characteristics can have a substantial influence on the amount of change that occurs during treatment. In addition, our inspection of prior data suggested that differences in the conditions under which data are collected at follow-up might affect outcomes differentially across stations. As of January 8, 1999 we modified our follow-up instrument so as to include questions concerning the conditions under which the data were collected. We found that if the follow-up data were collected by clinicians associated with the programs either in face-to-face contact or over the telephone, veterans' reports of their outcomes and their satisfaction were significantly higher than if the data were collected by mail or by face-to-face contact or telephone by nonclinicians who were associated with the programs. We recommend, therefore, that follow-up data *not* be collected by clinicians who are associated with the programs.

As a result of these influences, outcomes should not be compared simply and directly *across* VISNs or stations without adjusting for these influences. The procedure for doing this is commonly referred to as risk adjustment (Iezzoni, 1995). Thus, the average outcome and satisfaction at each individual VISN or station is compared to that of the median VISN or station, after statistical adjustment for differences in patient characteristics at admission and conditions of follow-up data collection using multivariate methods. The significance levels for individual VISNs or stations performing significantly better or worse than their respective median counterparts are identified for each outcome measure and satisfaction.

### ***Data Analytic Strategy***

The first step in the analytic process is to evaluate the significance of the change from baseline to follow-up for each of the outcome indices for each station. Paired-comparison t-tests are performed on the true-scored data to determine the significance of these changes. The means themselves and the significance of the differences between admission and four-month follow-up are presented in Tables 4-2 through 4-13.

The next step is to regress the scores at four-months follow-up on the scores at admission to produce a set of residual outcome scores. These residual scores represent outcomes adjusted for admission levels. Residual scores for each of the six outcome variables are then correlated with 25 different sociodemographic and clinical characteristics at the time of admission and with an index ordering the conditions of data collection at follow-up.

In the data set for this report, 10 characteristics were found to be correlated significantly ( $p < .05$ ) with the residual scores for two or more of the outcome variables and, therefore, were retained for use as risk-adjusters in subsequent analyses. These characteristics are veterans' age, African American ethnicity, marital status, lifetime history of incarceration, war zone service, number of comorbid psychiatric disorders, lifetime history of a suicide attempt, service connected for PTSD, previous treatment in a specialized PTSD program, and the follow-up data having been collected by a clinician associated with the program. Ten characteristics were found to be correlated significantly with the satisfaction ratings and were retained for use as risk-adjusters for analyses involving satisfaction: age, marital status, distance of residence from the medical center, lifetime history of incarceration, having received hostile or friendly fire, having witnessed atrocities, number of comorbid psychiatric disorders, service connection for PTSD, currently experiencing medical problems, and service connection for a medical disorder.

The third step in the analyses is to use analysis of covariance to generate risk-adjusted follow-up means for VISNs and stations for each clinical outcome and patient satisfaction. True-scored follow-up means, adjusted for risk factors, are presented for the six outcome indices for each VISN and station in Tables 4-2 through 4-13.

Then multiple regression analysis is employed to compare the outcomes and satisfaction for all VISNs or stations to that of the median VISN or station for each outcome and satisfaction. This analysis produced a regression coefficient for each VISN or station, representing the number of scale points that that VISN or station deviated from its median counterpart after risk adjustment. The scale points for clinical outcomes and satisfaction are presented in the metrics of the instruments used to measure them. The regression coefficients are presented for outcomes in Tables 4-2 through 4-13 and for satisfaction in Tables 4-16 and 4-17 as the "Deviation of the Mean from the Median". Significance levels represent the probability that each deviation could have occurred by chance. For ease of identification, those VISNs and stations whose outcomes or satisfaction were significantly worse than that of their median counterpart are marked by an "X". As noted above, outcomes which were significantly worse than that of the median for the Short Mississippi Scale (Tables 4-2 and 4-3), the ASI Composite for Alcohol Abuse (Tables 4-6

and 4-7), the ASI Composite for Drug Abuse (Tables 4-8 and 4-9), or for Work (Tables 4-12 and 4-13) do not meet the goals for Population Measures 1, 2 and/or 3 in VHA Directive 96-051 as modified above.

Conducting the monitoring protocol over several years has enabled us to track outcomes over time. We track the changes in outcomes from baseline to follow-up from 1997 through 2004. The patterns of these changes are graphed in Figures 1-3.

### ***Measures of Outcome***

The baseline data for outcomes monitoring are collected by a self-report questionnaire at the time of admission to specialized PTSD treatment, and follow-up data by a parallel questionnaire four months after discharge. (Details of the monitoring protocol, the quality control procedures at NEPEC, and copies of the data collection forms can be found in Fontana and Rosenheck, 1997b.) Outcome is defined as the *change* in symptoms and functioning from the month preceding admission to the month preceding the four-month follow-up and is assessed in five domains: 1) PTSD symptoms, 2) alcohol abuse, 3) drug abuse, 4) violence, and 5) work.

#### ***PTSD Symptoms***

Due to their particular significance in these specialized programs, PTSD symptoms are measured by two instruments: the Short Form of the Mississippi Scale for Combat-Related PTSD that has been validated in a large sample of outpatients (Fontana & Rosenheck, 1994) and a four-item PTSD Scale that has been specially constructed for program monitoring to assess: 1) intrusive thoughts, flashbacks or nightmares, 2) avoidance of reminders of the war, 3) feelings of numbness or emotional distance from other people, and 4) sleep disturbances, irritability or hyperarousal (Cronbach alpha=0.67). For the SIPPs nationally, there was significant improvement in PTSD ( $p<.0001$ ) as measured by both instruments. The true-scored Short Mississippi Scale decreased by 2.48 points (6.30%) from 39.36 to 36.88; and the true-scored PTSD Scale decreased by 1.47 points (8.82%) from 16.67 to 15.20. Both decreases are significant at  $p<.0001$ . The average length of stay in the SIPPs nationally was 46.64 days ( $sd=31.94$ ). Both of these changes in PTSD symptoms were correlated significantly ( $p<.05$ ) with length of stay:  $r=-.11$  for the Short Mississippi Scale and  $r=-.07$  for the PTSD Scale.

#### ***Alcohol Abuse and Drug Abuse***

Alcohol abuse and drug abuse are measured by the composite indices from the Addiction Severity Index (McLellan et al., 1985), a widely used and well-validated measure of substance abuse outcomes. Nationally, there was a significant decrease in alcohol abuse ( $p<.0001$ ) and drug abuse ( $p>.0001$ ). The true-scored alcohol abuse composite decreased by .03 points (23.08%) from .13 to .10; the true-scored drug abuse composite decreased by .01 points (20%) from .05 to .04. Neither change in substance abuse was correlated significantly with



length of stay:  $r=-.01$  for alcohol abuse and  $r=.03$  for drug abuse.

### *Violence*

Violence is measured by four items that were adapted from the National Vietnam Veterans Readjustment Study (Kulka et al., 1990): 1) destruction of property, 2) threatening someone with physical violence without a weapon, 3) threatening someone with a weapon, and 4) physically fighting with someone (Cronbach alpha=0.71). Nationally, the true-scored violence scale decreased significantly ( $p<.0001$ ) by .70 points (51.85%) from 1.35 to 0.65. The decrease in violence was correlated significantly with length of stay ( $r=-.06$ ).

### *Work*

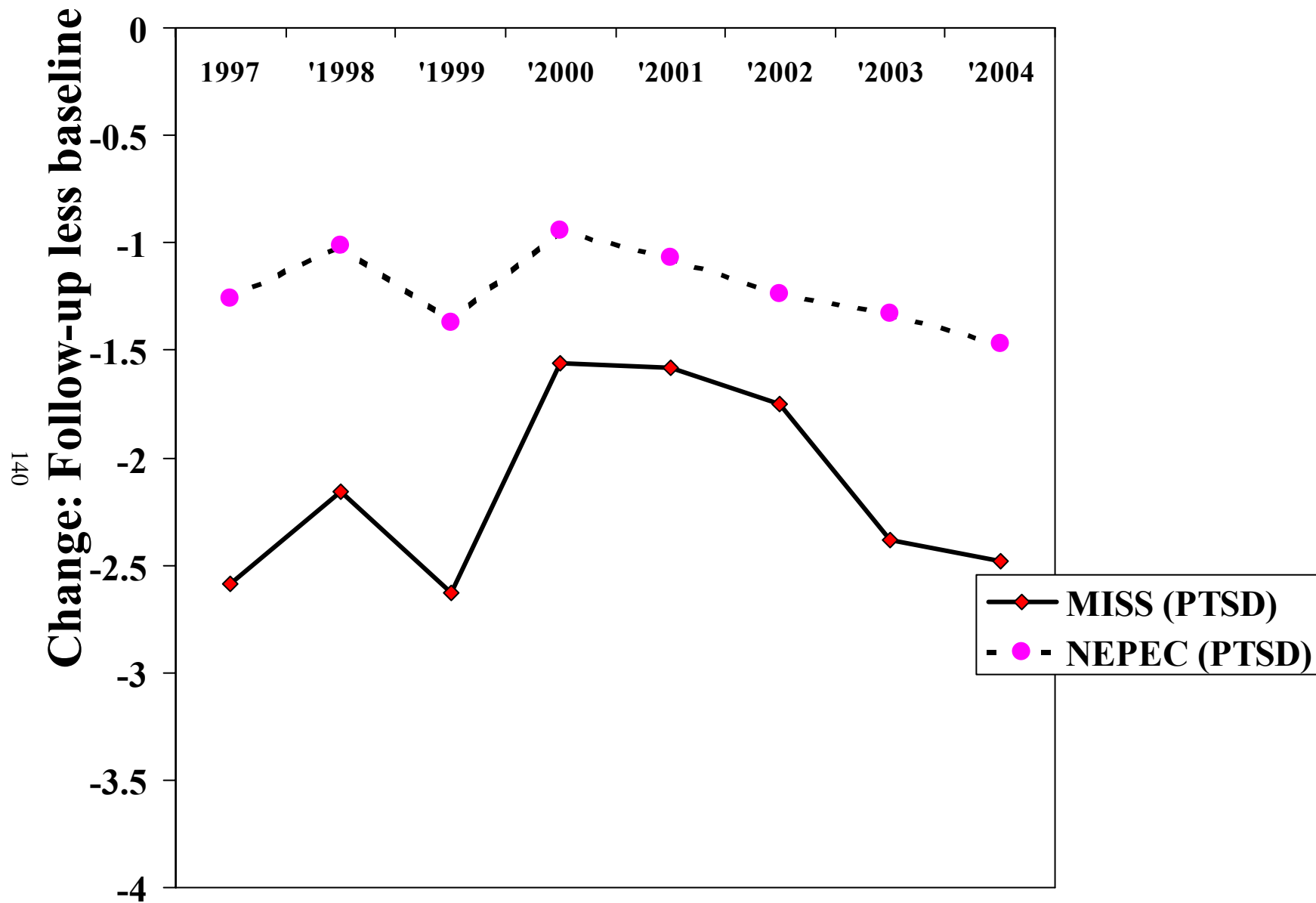
Work is measured as the number of days employed for pay during the 30 days preceding the interview. Nationally, there was a significant *decrease* in true-scored work outcomes ( $p<.0001$ ). The true-scored number of days worked during the past 30 days decreased by 1.22 (41.64%) from 2.93 to 1.71 days. The decrease in days worked was not correlated significantly with length of stay ( $r=-.01$ ).

### ***Patterns of Change over Time***

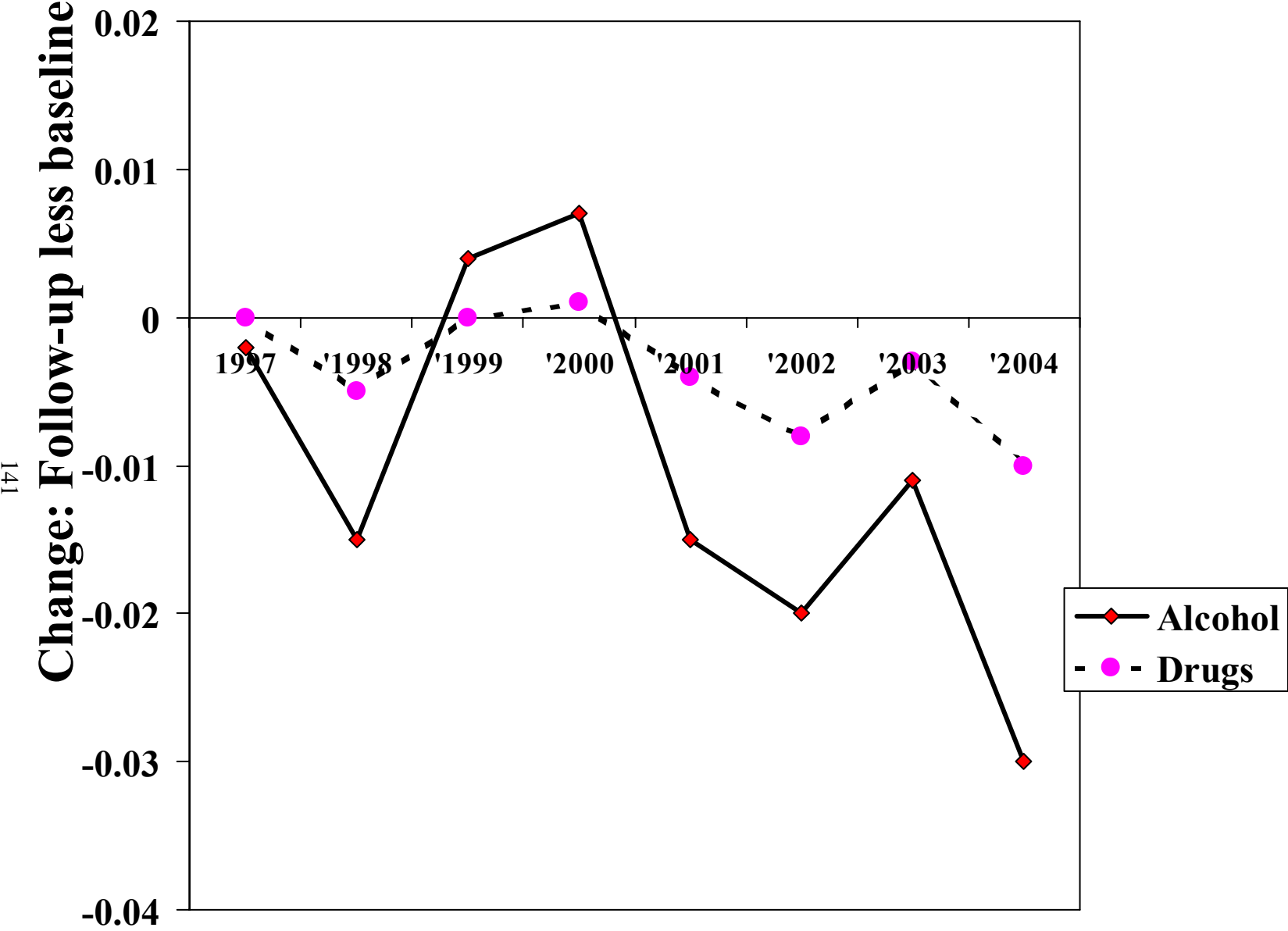
Outcomes were represented by the differences in clinical status between follow-up four months after discharge and admission. For each outcome measure, the change in this difference was evaluated across time by including as covariates the admission level of the measure as well as all background factors that were found to be related significantly to fiscal year. The changes in outcome scores from FY 1997 through FY 2004 are presented in Figures 1-3. The scales on the vertical (Y) axes show that the outcomes are quite modest in absolute terms, although for each measure there is a statistically significant difference from admission to follow-up across the years. It should be noted that a negative outcome score for measures of PTSD, substance use, and violence indicates a reduction in symptoms and is therefore desirable; while a negative outcome score for work indicates a reduction in days of employment and is therefore undesirable.

Figure 1 presents the changes in PTSD symptoms. For both the Mississippi and NEPEC measures, there has been consistent progress in the amelioration of PTSD symptom severity over the years, particularly since the year 2000. The changes in alcohol and drug use can be seen in Figure 2. There has been a largely consistent trend for an increasing improvement in alcohol and drug outcomes since the year 2000. Outcomes worsened somewhat in 2003 but then showed a substantial improvement from 2003 to 2004. The outcomes for violence have shown a largely steady improvement over the years, with a small decline in improvement in 2000 and 2004. The overall direction, however, is one of progress in ameliorating the propensity for violence. Outcomes for work worsened substantially from 1997 to 1999, but then stabilized into a low amplitude saw-toothed pattern.

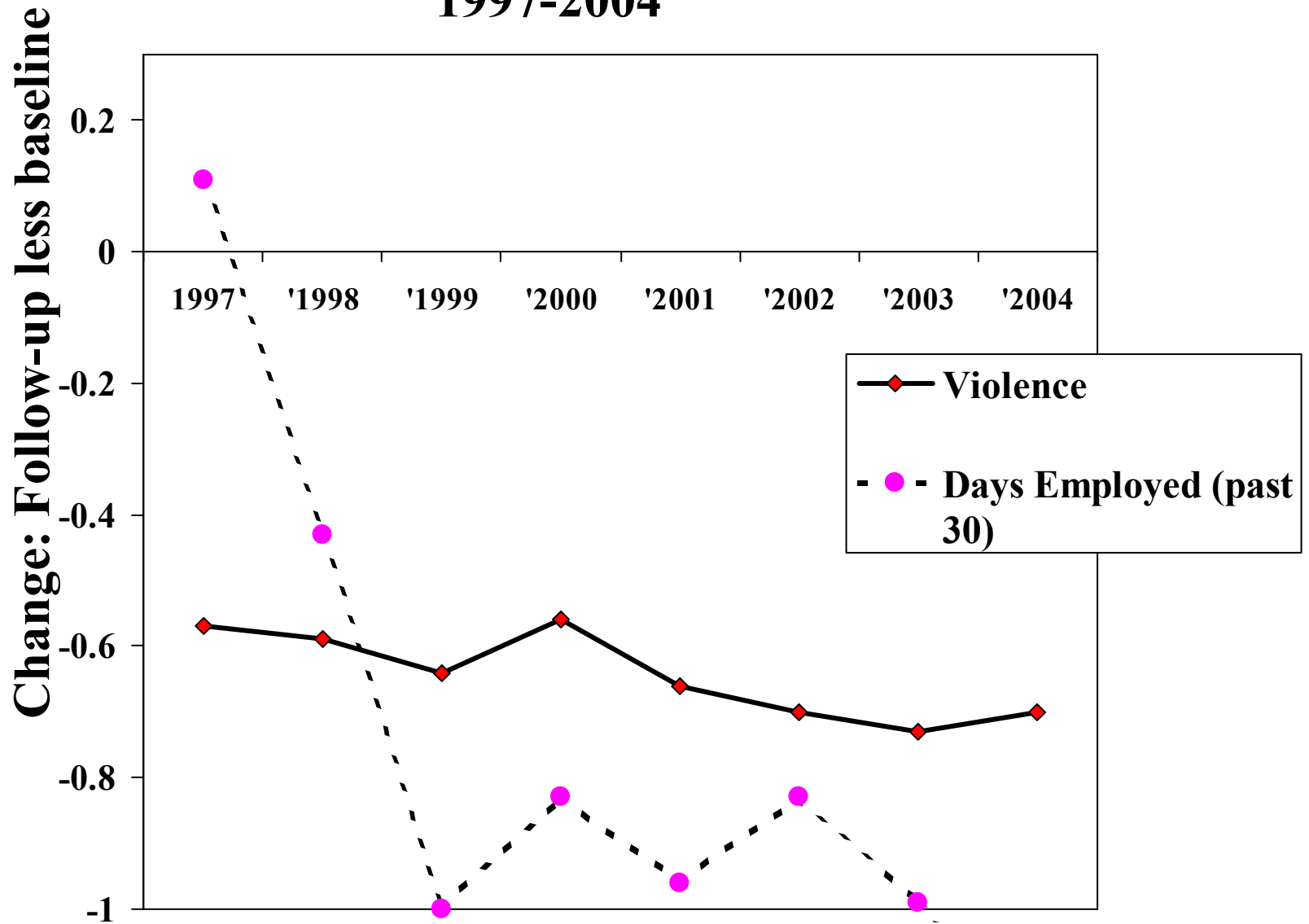
# Changes in PTSD Outcome Scores: 1997-2004



# Changes in ASI Outcome Scores: 1997-2004



# Changes in Violence Scores and Days Employed: 1997-2004



### ***Satisfaction with Services***

The follow-up questionnaire was modified in June 1996 to permit the monitoring of veterans' satisfaction with the clinical services received. Four items, scored on 4-point and 5-point Likert scales, cohered as a highly internally consistent cluster (Cronbach alpha=.84). These items, based on the work of Attkisson et al. (1983), asked the veterans how satisfied they were with the care they received from the specialized PTSD program, how they would rate the care they received from the specialized PTSD program, whether they would choose to go to the specialized PTSD program again if they needed treatment, and whether they would recommend the specialized PTSD program to other veterans if they needed treatment. Satisfaction scores can range from 4 to 18. A mid-point score of 11 represents equally satisfied and dissatisfied ratings. Nationally, veterans gave the SIPP a rating of 16.23, indicating that overall they were satisfied with services. Satisfaction was correlated significantly ( $p<.05$ ) with length of stay ( $r=.04$ ).

Satisfaction is an important dimension of quality of care in its own right. Only 10% of the explained variance in satisfaction ratings can be attributed to improved outcomes (Fontana & Rosenheck, 1999). Satisfaction and outcomes, therefore, should be considered as largely separate dimensions of quality of care.

### ***A Report Card for Outcomes***

Although performance assessment of PTSD treatment clearly requires consideration of multiple outcome domains, the complex results do not allow summary assessment of the performance of each VISN or station. The six outcome variables are therefore combined into a single index, analogous to the cumulative grade-point average, on a report card of outcome performance. To accomplish this synthesis, we had to resolve two questions: 1) how to combine the regression coefficients when they were derived from variables that were measured with different metrics, and 2) what weight to give the regression coefficients for the different variables in combining them.

We resolved the first problem by using the *standardized* regression coefficients for deviations from the median VISN or station. This converts the different metrics for each variable into the common metric of standard scores. In addition, this method has the advantage of taking the actual sample sizes and variabilities of the individual VISNs and stations into account. Additionally, we reversed the sign of the coefficient for Work so that the direction was the same as for symptoms, substance abuse and violence.

We resolved the second problem by giving the combined value of the two PTSD symptom outcomes equal weight to the combined value of the other four outcomes. This weighting was decided upon after consultation with national experts in PTSD treatment and VHA headquarters. There was a consensus that while a diverse range of outcomes was desirable,

the specialized nature of these programs as PTSD programs warranted a heavier emphasis on the outcomes for PTSD symptoms than for other outcomes.

The standardized coefficients for the Short Mississippi Scale and the NEPEC PTSD Scale were thus summed and averaged, as were the standardized coefficients for Alcohol Abuse, Drug Abuse, Violence and Work. These two averages were summed to produce the Standardized Combined Mean for all the outcomes. Finally, the Standardized Combined Mean was ranked, with the lowest ranks assigned to VISNs and stations with the best outcomes and the highest ranks assigned to those with the worst outcomes. The ranks constitute a report card of the goodness of VISNs' and stations' outcome performance represented as a single index. These data can be found in Tables 4-14 and 4-15.

### ***A Report Card for Satisfaction***

The mean risk-adjusted satisfaction ratings are presented in Table 4-16 by VISN and in Table 4-17 for stations. Comparison of each VISN and station to its median counterpart yields deviation scores with associated significance levels. The deviation scores represent the number of satisfaction scale points that the satisfaction rating for each VISN or station differs from the satisfaction rating of the median VISN or station. VISNs and stations are ranked by their standardized deviation from the median from highest to lowest to provide an index comparable to the single index for outcomes. These data are presented in Tables 4-16 and 4-17.

### ***Limitations to the Monitoring Methodology***

Several limitations of the data presented here deserve comment and consideration. First, it must be acknowledged that although this report presents one of the largest outcome assessment efforts of its type, the numbers of cases and the follow-up rates from some individual stations are smaller than optimal. All stations, however, submitted sufficient data to be included in the comparisons. We are hopeful that data collection will continue at this high level of adequacy as VHA leadership emphasizes the value of the information available through the monitoring effort to the maintenance and improvement of the quality of clinical services in the new VA.

Second, it must be acknowledged that statistical risk adjustment, although widely used, is imperfect, and can never be as effective as random assignment in establishing equivalent groups. Since it will never be possible to randomly assign patients living in different localities to health care facilities (VA or otherwise), however, clinical performance evaluation must continue to develop within the limits of available risk adjustment technologies.

Third, instrumentation in large-scale outcome assessment efforts must be economical, and, in the area of psychiatric assessment, must typically rely on self-report data that are subject to misrepresentation. Some clinicians have expressed the specific concern that patients may

underreport their improvement out of fear that reporting improvement will jeopardize their compensation status. The instruments used in the current effort have well-established psychometric properties and were selected because of their consistency with results that were found using more extensive assessment batteries in smaller scale studies (Fontana & Rosenheck, 1996a). Moreover, a study of the effects of compensation-seeking on treatment outcomes found that there was no evidence of such effects among outpatients and among inpatients in programs of short to moderate lengths of stay (Fontana & Rosenheck, 1998). Only in long-stay programs (averaging 100 days) was there evidence of a significant compensation-seeking bias on outcomes. This compensation-seeking effect, along with generally poorer outcomes and poorer ratings of satisfaction, led us to suggest consideration of avoiding the implementation of long-stay programs.

Fourth, as noted above, only limited data are available on the nature of services delivered during intensive treatment, and no information is available on the quality of aftercare services. While this information might help to account for weaker outcomes at some stations, it would not alter the basic assessment of outcomes presented in this report. For a responsible, patient-oriented treatment agency, inpatient care cannot be divorced from outpatient care even if the care is delivered through a different health care system. At this stage in the development of methods for outcomes monitoring, we do not yet have the tools to both identify problems and present definitive solutions. At this time, comparative outcome data can only suggest broad directions for improvement. Treatment modification and development must be based on clinical and administrative experience, and on familiarity with the patients and operating circumstances confronting each station.

### ***Further Analyses and the Commitment to Quality***

We plan to conduct further analyses to determine the possible role of various treatment factors in contributing to superior outcomes. Primary among them are length of stay, size of program and use of medications. This past fiscal year, we continued our collaboration with the National Center for PTSD in developing a monitoring instrument for assessing the outcomes of specialized outpatient PTSD programs.

Providing effective treatment of military-related PTSD is a major priority for the Veterans Health Administration. Although techniques of outcomes monitoring and assessment are in an early stage of development, the implementation of a nationwide effort to assess outcomes of intensive treatment of PTSD is a major accomplishment for VA, and reflects a commitment in the new VA to maintaining high levels of quality, accountability, and health care value.

Table 4-1. Adequacy of Data

VISN	Station	# Follow-Ups Due in FY'04	# Follow-Ups Due that were Obtained	% Follow-Ups Due that were Obtained*
1	Northampton	58	53	91
1	Togus	102	72	71
1	Newington (West Haven)	25	15	60
1	White River Junction	34	20	59
2	Batavia (Buffalo)	85	79	93
3	Lyons	148	148	100
3	Montrose	120	115	96
4	Clarksburg	57	40	70
4	Coatesville	162	153	94
5	Baltimore	78	41	53
5	Martinsburg	125	96	77
6	Salem	84	83	99
6	Salisbury	108	97	90
7				
8	Bay Pines	82	68	83
8	Miami	73	60	82
9				
10	Brecksville (Cleveland)	16	16	100
10	Cincinnati	56	31	55
10	Dayton	46	30	65
11	Battle Creek	172	116	67
12	Milwaukee	37	20	54
12	North Chicago	167	106	63
12	Tomah	54	39	72
15	Topeka	90	72	80
16	Jackson	44	36	82
16	New Orleans	61	51	84
16	North Little Rock	156	128	82
17	Waco	85	75	88
18	Tucson	80	53	66
19	Denver	136	135	99
20	American Lake (Tacoma)	83	58	70
20	Boise	21	14	67
20	Roseburg	71	40	56
20	Seattle	163	143	88
21	Hilo	37	29	78
21	Palo Alto	161	117	73
22				
23	Des Moines	41	38	93
23	Hot Springs	53	40	75
ALL VA		3171	2527	80

\* Program Measure #1 for PTSD in VHA Directive 10-96-051. SEP goal was met by all stations.



Table 4-2. Means for PTSD (Short Miss.) by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	37.55	37.51	-0.04	40.92	38.55	-2.37	0.95	
2	39.11	38.14	-0.97	37.93	38.06	0.13	0.46	
3	39.28	33.28	-6.00 *	36.56	33.02	-3.54	-4.58	0.0001
4	38.76	35.04	-3.72 *	37.35	35.58	-1.77	-2.02	0.005
5	41.46	36.18	-5.28 *	40.31	34.82	-5.49	-2.78	0.0002
6	39.55	37.50	-2.05 *	39.59	37.27	-2.32	-0.33	
7				41.09				
8	39.74	38.75	-0.99 *	40.70	38.55	-2.15	0.95	
9				42.09				
10	40.05	38.25	-1.80 *	40.07	37.75	-2.32	0.15	
11	40.57	40.63	0.06	38.10	39.65	1.55	2.04	X 0.01
12	39.53	38.42	-1.11 *	39.92	38.04	-1.88	0.44	
15#	38.20	35.80	-2.40 *	38.13	37.60	-0.53	0.00	
16	40.87	38.24	-2.63 *	40.01	37.59	-2.42	-0.01	
17	38.48	34.40	-4.08 *	37.35	35.30	-2.05	-2.30	0.005
18	39.47	38.25	-1.22	40.54	38.05	-2.49	0.45	
19	42.21	37.23	-4.98 *	38.84	35.61	-3.23	-1.99	0.01
20	37.50	36.05	-1.45 *	38.87	37.08	-1.79	-0.52	
21	37.61	36.60	-1.01 *	38.89	37.86	-1.03	0.26	
22				35.27				
23	39.81	36.64	-3.17 *	38.39	36.42	-1.97	-1.18	
ALL VA	39.36	36.88	-2.48 *	39.01	36.89	-2.12		

# Indicates the median VISN for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median VISN; SEP goal was not met.

Table 4-3. Means for PTSD (Short Miss.) by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	37.33	35.78	-1.55 *	40.14	36.78	-3.36	-0.88	
1	Togus	37.39	38.28	0.89	41.07	39.07	-2.00	1.40	
1	Newington (West Haven)	38.35	38.88	0.53	41.00	40.49	-0.51	2.83	
1	White River Junction	38.17	38.35	0.18	41.49	38.18	-3.31	0.52	
2	Batavia (Buffalo)	39.11	38.14	-0.97	37.83	38.14	0.31	0.47	
3	Bronx				38.94				
3	Lyons	38.17	34.65	-3.52 *	35.27	35.17	-0.10	-2.49	0.008
3	Montrose	40.23	32.10	-8.13 *	38.24	31.30	-6.94	-6.36	0.0001
4	Clarksburg	39.92	34.48	-5.44 *	33.10	36.67	3.57	-0.99	
4	Coatesville	38.45	35.19	-3.26 *	41.13	35.38	-5.75	-2.27	0.008
5	Baltimore	41.24	39.76	-1.48 *	40.40	38.44	-1.96	0.78	
5	Martinsburg	41.55	34.65	-6.90 *	40.44	33.17	-7.27	-4.49	0.0001
6	Salem	40.51	37.71	-2.80 *	40.73	37.04	-3.69	-0.62	
6	Salisbury	38.74	37.33	-1.41 *	37.29	37.59	0.30	-0.07	
7	Augusta				42.03				
7	Tuskegee				39.38				
8	Bay Pines	40.74	38.82	-1.92 *	41.93	38.32	-3.61	0.66	
8	Miami	38.61	38.66	0.05	39.40	38.78	-0.62	1.11	
9	Louisville				41.92				
10	Brecksville (Cleveland)	39.71	39.46	-0.25	39.26	39.03	-0.23	1.37	
10	Cincinnati	39.25	38.97	-0.28	40.77	38.38	-2.39	0.72	
10	Dayton	41.05	36.87	-4.18 *	39.16	36.49	-2.67	-1.17	
11	Battle Creek	40.57	40.63	0.06	38.11	39.75	1.64	2.09	X 0.02
12	Milwaukee	38.61	35.65	-2.96	36.70	35.96	-0.74	-1.70	
12	North Chicago	39.53	38.89	-0.64	39.34	38.52	-0.82	0.86	
12	Tomah	39.98	38.57	-1.41	41.45	37.92	-3.53	0.26	
15	Topeka	38.20	35.80	-2.40 *	38.18	37.51	-0.67	-0.15	
16	Jackson	40.86	39.74	-1.12	40.94	38.87	-2.07	1.20	
16	New Orleans	39.68	35.47	-4.21 *	39.98	36.29	-3.69	-1.37	
16	North Little Rock	41.36	38.94	-2.42 *	39.74	37.70	-2.04	0.04	
17	Temple				39.55				
17	Waco	38.48	34.40	-4.08 *	36.71	35.34	-1.37	-2.33	0.02
18	Phoenix				40.59				
18	Tucson	39.47	38.25	-1.22		38.06		0.40	
19	Denver	42.21	37.23	-4.98 *	38.33	35.74	-2.59	-1.92	0.03
19	Sheridan				39.47				
20	American Lake	40.04	40.04	0.00	40.44	39.33	-1.11	1.67	
20	Anchorage				34.55				
20	Boise	37.92	31.89	-6.03 *	42.46	32.40	-10.06	-5.26	0.0003
20	Portland				39.75				
20#	Roseburg	38.75	37.41	-1.34	35.25	37.66	2.41	0.00	
20	Seattle	36.08	34.47	-1.61 *	39.96	36.29	-3.67	-1.37	
21	Hilo	39.52	37.02	-2.50 *	39.92	37.35	-2.57	0.19	
21	Palo Alto	37.16	36.50	-0.66	38.44	37.85	-0.59	-0.71	
21	San Francisco				41.13				
22	West Los Angeles				35.38				
23	Minneapolis				41.44				
23	Knoxville				41.90				
23	Des Moines	40.79	37.01	-3.78	31.82	36.69	4.87	-0.97	
23	Hot Springs	38.88	36.28	-2.60 *		36.16		-1.50	
ALL VA		39.36	36.88	-2.48 *	39.01	36.89	-2.12		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.

Table 4-4. Means for PTSD (NEPEC Scale) by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	15.90	15.36	-0.54 *	16.86	15.87	-0.99	0.45	
2#	16.59	15.59	-1.00 *	16.29	15.43	-0.86	0.00	
3	16.69	13.81	-2.88 *	15.31	13.82	-1.49	-1.61	0.0001
4	16.22	14.63	-1.59 *	15.86	14.75	-1.11	-0.68	0.02
5	17.10	14.90	-2.20 *	16.68	14.65	-2.03	-0.78	0.01
6	16.67	15.28	-1.35 *	15.98	15.18	-0.80	-0.24	
7				17.14				
8	16.63	16.03	-0.60 *	16.96	16.08	-0.88	0.65	X 0.05
9				17.66				
10	16.91	15.97	-0.94 *	16.53	15.89	-0.64	0.46	
11	16.80	16.48	-0.32	15.95	16.18	0.23	0.76	X 0.02
12	16.80	15.70	-0.57 *	16.39	15.55	-0.84	0.12	
15	16.59	14.42	-2.17 *	15.73	14.78	-0.95	-0.64	
16	17.00	15.85	-1.15 *	16.60	15.76	-0.84	0.33	
17	16.65	14.66	-1.99 *	15.60	14.73	-0.87	-0.69	0.05
18	16.96	15.60	-1.36 *	16.63	15.45	-1.18	0.02	
19	17.09	15.01	-2.08 *	16.30	14.65	-1.65	-0.78	0.02
20	16.69	14.94	-1.75 *	16.13	15.02	-1.11	-0.41	
21	16.28	14.99	-1.29 *	16.29	15.36	-0.93	-0.06	
22				13.91				
23	16.80	15.62	-1.18 *	15.43	15.59	0.16	0.16	
ALL VA	16.67	15.20	-1.47 *	16.15	15.20	-0.95		

# Indicates the median VISN for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median VISN; SEP goal was not met.

Table 4-5. Means for PTSD (NEPEC Scale) by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	15.71	14.83	-0.88 *	17.12	15.53	-1.59	0.07	
1	Togus	15.95	15.58	-0.37	16.87	15.89	-0.98	0.43	
1	Newington (West Haven)	15.98	16.10	0.12	16.76	16.80	0.04	1.34	X 0.05
1	White River Junction	16.23	15.39	-0.84	16.92	15.41	-1.51	-0.05	
2	Batavia (Buffalo)	16.59	15.59	-1.00 *	16.27	15.50	-0.77	0.04	
3	Bronx				15.81				
3	Lyons	16.53	15.15	-1.38 *	15.04	15.22	0.18	-0.24	0.0009
3	Montrose	16.84	12.66	-4.18 *	15.59	12.58	-3.01	-2.88	0.0001
4	Clarksburg	16.65	15.48	-1.17 *	14.80	16.12	1.32	0.66	
4	Coatesville	16.11	14.41	-1.70 *	16.80	14.48	-2.32	-0.98	0.003
5	Baltimore	17.01	15.79	-1.22 *	16.70	15.52	-1.18	0.06	
5	Martinsburg	17.15	14.52	-2.63 *	16.76	14.20	-2.56	-1.26	0.0005
6	Salem	17.20	15.83	-1.37 *	16.06	15.54	-0.52	0.08	
6	Salisbury	16.22	14.81	-1.41 *	15.84	14.96	-0.88	-0.50	
7	Augusta				17.57				
7	Tuskegee				16.41				
8	Bay Pines	17.30	16.41	-0.89 *	16.94	16.12	-0.82	0.66	
8	Miami	15.86	15.60	-0.26	16.94	15.99	-0.95	0.53	
9	Louisville				17.59				
10	Brecksville (Cleveland)	16.73	16.33	-0.40	15.96	16.25	0.29	0.79	
10	Cincinnati	16.73	16.55	-0.18	16.92	16.51	-0.41	1.05	X 0.03
10	Dayton	17.19	15.17	-2.02 *	16.18	15.14	-1.04	-0.32	
11	Battle Creek	16.80	16.48	-0.32	15.96	16.26	0.30	0.80	X 0.02
12	Milwaukee	15.55	14.17	-1.38 *	13.97	14.84	0.87	-0.62	
12	North Chicago	17.08	15.99	-1.09 *	16.42	15.69	-0.73	0.23	
12	Tomah	16.71	15.67	-1.04 *	17.00	15.50	-1.50	0.04	
15	Topeka	16.59	14.42	-2.17 *	15.74	14.81	-0.93	-0.65	
16	Jackson	16.78	16.45	-0.33	16.82	16.29	-0.53	0.83	
16	New Orleans	16.83	14.93	-1.90 *	17.09	15.09	-2.00	-0.37	
16	North Little Rock	17.14	16.05	-1.09 *	16.33	15.85	-0.48	0.39	
17	Temple				16.08				
17	Waco	16.65	14.66	-1.99 *	15.45	14.80	-0.65	-0.66	
18	Phoenix				16.66				
18#	Tucson	16.96	15.60	-1.36 *		15.46		0.00	
19	Denver	17.09	15.01	-2.08 *	16.36	14.76	-1.60	-0.70	0.05
19	Sheridan				16.13				
20	American Lake	17.01	16.46	-0.55	16.43	16.18	-0.25	0.40	
20	Anchorage				15.24				
20	Boise	15.29	13.57	-1.72	16.95	14.11	-2.84	-1.35	0.03
20	Portland				16.54				
20	Roseburg	16.13	15.67	-0.46 *	14.66	15.86	1.20	0.40	
20	Seattle	16.86	14.27	-2.59 *	16.62	14.31	-2.31	-1.15	0.0007
21	Hilo	16.56	14.76	-1.80 *	15.84	14.88	-0.96	-0.58	
21	Palo Alto	16.21	15.04	-1.17 *	16.18	15.42	-0.76	-0.04	
21	San Francisco				16.94				
22	West Los Angeles				13.92				
23	Minneapolis				16.87				
23	Knoxville				17.15				
23	Des Moines	17.22	16.31	-0.91 *	12.27	16.18	3.91	0.72	
23	Hot Springs	16.40	14.97	-1.43 *		15.05		-0.41	
ALL VA		16.67	15.20	-1.47 *	16.15	15.20	-0.95		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.

Table 4-6. Means for Alcohol Abuse (ASI) by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.13	0.09	-0.04 *	0.17	0.10	-0.07	-0.01	
2	0.10	0.10	0.00	0.18	0.10	-0.08	0.00	
3	0.17	0.09	-0.08 *	0.14	0.08	-0.06	-0.02	0.005
4	0.15	0.09	-0.06 *	0.17	0.10	-0.07	-0.02	0.007
5	0.17	0.11	-0.06 *	0.16	0.10	-0.06	-0.01	
6	0.09	0.08	-0.01	0.15	0.09	-0.06	-0.01	
7				0.16				
8	0.11	0.11	0.00	0.17	0.11	-0.06	0.00	
9				0.15				
10	0.14	0.10	-0.04 *	0.18	0.10	-0.08	-0.01	
11	0.15	0.12	-0.03 *	0.17	0.12	-0.05	0.01	
12	0.13	0.13	0.00	0.16	0.12	-0.04	0.02	X 0.01
15	0.16	0.12	-0.04 *	0.16	0.12	-0.04	0.01	
16	0.11	0.07	-0.04 *	0.17	0.08	-0.09	-0.03	0.0001
17	0.09	0.09	0.00	0.15	0.10	-0.05	0.00	
18	0.11	0.11	0.00	0.17	0.12	-0.05	0.01	
19	0.07	0.11	0.04 @	0.16	0.12	-0.04	0.01	
20#	0.10	0.10	0.00	0.16	0.10	-0.06	0.00	
21	0.13	0.11	-0.02	0.20	0.12	-0.08	0.01	
22				0.14				
23	0.15	0.07	-0.08 *	0.18	0.13	-0.05	0.03	X 0.005
ALL VA	0.13	0.10	-0.03 *	0.16	0.10	-0.06		

# Indicates the median VISN for FY 2004.

\* Significant at p&lt;.05. @ Outcome was significantly worse.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median VISN; SEP goal was not met.

Table 4-7. Means for Alcohol Abuse (ASI) by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.11	0.07	-0.04 *	0.15	0.07	-0.08	-0.04	0.01
1	Togus	0.13	0.10	-0.03 *	0.17	0.09	-0.08	-0.02	
1	Newington (West Haven)	0.17	0.13	-0.04	0.19	0.12	-0.07	0.01	
1	White River Junction	0.11	0.11	0.00	0.18	0.12	-0.06	0.01	
2	Batavia (Buffalo)	0.10	0.10	0.00	0.18	0.10	-0.08	-0.01	
3	Bronx				0.17				
3	Lyons	0.14	0.10	-0.04 *	0.13	0.09	-0.04	-0.02	
3	Montrose	0.19	0.09	-0.10 *	0.13	0.07	-0.06	-0.04	0.0006
4	Clarksburg	0.11	0.10	-0.01	0.14	0.11	-0.03	0.00	
4	Coatesville	0.16	0.09	-0.07 *	0.20	0.08	-0.12	-0.03	0.0009
5	Baltimore	0.23	0.15	-0.08 *	0.17	0.13	-0.04	0.02	
5	Martinsburg	0.15	0.09	-0.06 *	0.16	0.08	-0.08	-0.03	0.007
6	Salem	0.08	0.07	-0.01	0.14	0.08	-0.06	-0.03	0.008
6	Salisbury	0.09	0.09	0.00	0.17	0.10	-0.07	-0.01	
7	Augusta				0.16				
7	Tuskegee				0.16				
8	Bay Pines	0.10	0.09	-0.01	0.17	0.10	-0.07	-0.01	
8	Miami	0.11	0.12	0.01	0.17	0.12	-0.05	0.01	
9	Louisville				0.14				
10	Brecksville (Cleveland)	0.11	0.07	-0.04	0.16	0.07	-0.09	-0.04	0.05
10	Cincinnati	0.08	0.10	0.02	0.19	0.11	-0.08	0.00	
10	Dayton	0.21	0.11	-0.10 *	0.18	0.10	-0.08	-0.01	
11	Battle Creek	0.15	0.12	-0.03 *	0.17	0.12	-0.05	0.01	
12	Milwaukee	0.25	0.17	-0.08	0.11	0.15	0.04	0.04	X 0.05
12#	North Chicago	0.11	0.09	-0.02	0.16	0.11	-0.05	0.00	
12	Tomah	0.14	0.16	0.02	0.17	0.15	-0.02	0.04	X 0.005
15	Topeka	0.16	0.12	-0.04 *	0.16	0.12	-0.04	0.01	
16	Jackson	0.09	0.07	-0.02	0.17	0.10	-0.07	-0.01	
16	New Orleans	0.10	0.07	-0.03 *	0.15	0.09	-0.06	-0.02	
16	North Little Rock	0.11	0.06	-0.05 *	0.18	0.06	-0.12	-0.05	0.0001
17	Temple				0.14				
17	Waco	0.09	0.09	0.00	0.15	0.10	-0.05	-0.01	
18	Phoenix				0.17				
18	Tucson	0.11	0.11	0.00		0.12		0.01	
19	Denver	0.07	0.11	0.04	@ 0.16	0.12	-0.04	0.01	
19	Sheridan				0.15				
20	American Lake	0.12	0.12	0.00	0.16	0.11	-0.05	0.00	
20	Anchorage				0.18				
20	Boise	0.07	0.10	0.03	0.16	0.12	-0.04	0.01	
20	Portland				0.14				
20	Roseburg	0.11	0.09	-0.02	0.16	0.10	-0.06	-0.01	
20	Seattle	0.09	0.09	0.00	0.17	0.10	-0.07	-0.01	
21	Hilo	0.11	0.12	0.01	0.25	0.13	-0.12	0.02	
21	Palo Alto	0.13	0.11	-0.02 *	0.19	0.11	-0.08	0.00	
21	San Francisco				0.22				
22	West Los Angeles				0.14				
23	Minneapolis				0.18				
23	Knoxville				0.18				
23	Des Moines	0.20	0.17	-0.03	0.18	0.16	-0.02	0.05	X 0.0007
23	Hot Springs	0.19	0.13	-0.06 *		0.11		0.00	
ALL VA		0.13	0.10	-0.03 *	0.16	0.10	-0.06		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05. @Outcome was significantly worse.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.

Table 4-8. Means for Drug Abuse (ASI) by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	0.04	0.03	-0.01 *	0.07	0.03	-0.04	-0.01	0.03
2#	0.03	0.04	0.01	0.08	0.04	-0.04	0.00	
3	0.07	0.04	-0.03 *	0.06	0.03	-0.03	-0.01	
4	0.06	0.04	-0.02 *	0.08	0.04	-0.04	0.00	
5	0.07	0.05	-0.02 *	0.07	0.04	-0.03	0.00	
6	0.03	0.03	0.00	0.06	0.03	-0.03	-0.01	
7				0.07				
8	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	0.05
9				0.05				
10	0.06	0.04	-0.02 *	0.07	0.04	-0.03	-0.01	
11	0.06	0.05	-0.01	0.07	0.05	-0.02	0.01	
12	0.05	0.05	0.00	0.07	0.05	-0.02	0.01	
15	0.06	0.05	-0.01	0.06	0.05	-0.01	0.01	
16	0.04	0.02	-0.02 *	0.07	0.02	-0.05	-0.02	0.0003
17	0.03	0.04	0.01	0.06	0.04	-0.02	0.00	
18	0.04	0.05	0.01 @	0.07	0.05	-0.02	0.01	
19	0.03	0.04	0.01 @	0.07	0.05	-0.02	0.01	
20	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	
21	0.05	0.04	-0.01	0.09	0.04	-0.05	0.00	
22				0.07				
23	0.07	0.06	-0.01	0.08	0.06	-0.02	0.02	0.006
ALL VA	0.05	0.04	-0.01 *	0.07	0.04	-0.03		

# Indicates the median VISN for FY 2004.

\* Significant at p&lt;.05. @ Outcome was significantly worse.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median VISN; SEP goal was not met.

Table 4-9. Means for Drug Abuse (ASI) by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	0.04	0.03	-0.01 *	0.06	0.03	-0.03	-0.01	
1	Togus	0.03	0.03	0.00	0.07	0.03	-0.04	-0.01	0.02
1	Newington (West Haven)	0.07	0.04	-0.03	0.08	0.04	-0.04	-0.01	
1	White River Junction	0.05	0.05	0.00	0.07	0.05	-0.02	0.01	
2	Batavia (Buffalo)	0.03	0.04	0.01	0.08	0.04	-0.04	0.00	
3	Bronx				0.08				
3	Lyons	0.05	0.04	-0.01 *	0.06	0.04	-0.02	-0.01	
3	Montrose	0.09	0.04	-0.05 *	0.06	0.02	-0.04	-0.02	0.0001
4	Clarksburg	0.03	0.04	0.01 @	0.06	0.06	0.00	0.01	
4	Coatesville	0.07	0.04	-0.03 *	0.09	0.04	-0.05	-0.01	
5	Baltimore	0.08	0.07	-0.01	0.07	0.06	-0.01	0.01	X 0.05
5	Martinsburg	0.06	0.04	-0.02 *	0.07	0.03	-0.04	-0.01	0.03
6	Salem	0.03	0.02	-0.01	0.06	0.03	-0.03	-0.02	0.0008
6	Salisbury	0.03	0.04	0.01	0.07	0.04	-0.03	-0.01	
7	Augusta				0.07				
7	Tuskegee				0.07				
8	Bay Pines	0.03	0.02	-0.01	0.07	0.03	-0.04	-0.01	0.005
8	Miami	0.05	0.05	0.00	0.07	0.05	-0.02	0.00	
9	Louisville				0.05				
10	Brecksville (Cleveland)	0.06	0.03	-0.03	0.07	0.03	-0.04	-0.02	0.05
10	Cincinnati	0.03	0.04	0.01 @	0.07	0.05	-0.02	0.00	
10	Dayton	0.08	0.04	-0.04 *	0.08	0.03	-0.05	-0.01	
11	Battle Creek	0.06	0.05	-0.01	0.07	0.05	-0.02	0.01	
12	Milwaukee	0.09	0.08	-0.01	0.05	0.07	0.02	0.03	X 0.002
12	North Chicago	0.05	0.04	-0.01	0.07	0.04	-0.03	0.00	
12	Tomah	0.05	0.05	0.00	0.06	0.05	-0.01	0.01	
15	Topeka	0.06	0.05	-0.01	0.06	0.05	-0.01	0.01	
16	Jackson	0.03	0.02	-0.01	0.07	0.03	-0.04	-0.02	0.02
16	New Orleans	0.03	0.03	0.00	0.07	0.03	-0.04	-0.01	
16	North Little Rock	0.04	0.02	-0.02 *	0.08	0.02	-0.06	-0.02	0.0001
17	Temple				0.06				
17	Waco	0.03	0.04	0.01	0.06	0.04	-0.02	0.00	
18	Phoenix				0.07				
18	Tucson	0.04	0.05	0.01 @		0.05		0.01	
19	Denver	0.03	0.04	0.01 @	0.07	0.05	-0.02	0.00	
19	Sheridan				0.06				
20	American Lake	0.06	0.05	-0.01	0.07	0.05	-0.02	0.01	
20	Anchorage				0.07				
20	Boise	0.03	0.04	0.01	0.08	0.04	-0.04	0.00	
20	Portland				0.06				
20	Roseburg	0.04	0.03	-0.01	0.07	0.04	-0.03	0.01	
20#	Seattle	0.04	0.04	0.00	0.07	0.04	-0.03	0.00	
21	Hilo	0.04	0.04	0.00	0.06	0.05	-0.01	0.00	
21	Palo Alto	0.05	0.04	-0.01	0.09	0.04	-0.05	0.00	
21	San Francisco				0.10				
22	West Los Angeles				0.07				
23	Minneapolis				0.08				
23	Knoxville				0.08				
23	Des Moines	0.07	0.06	-0.01	0.08	0.06	-0.02	0.01	X 0.05
23	Hot Springs	0.07	0.06	-0.01		0.06		0.01	X 0.03
ALL VA		0.05	0.04	-0.01 *	0.07	0.04	-0.03		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05. @Outcome was significantly worse.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.



Table 4-10. Means for Violence by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	1.03	0.63	-0.40 *	1.37	0.71	-0.66	0.00	
2	1.19	0.56	-0.63 *	1.23	0.58	-0.65	-0.12	
3	1.43	0.36	-1.07 *	0.96	0.32	-0.64	-0.38	0.0001
4	1.55	0.37	-1.18 *	1.30	0.32	-0.98	-0.38	0.0001
5	1.58	0.66	-0.92 *	1.30	0.59	-0.71	-0.11	
6	1.22	0.55	-0.67 *	1.19	0.58	-0.61	-0.12	0.05
7				1.16				
8	1.43	0.90	-0.53 *	1.39	0.89	-0.50	0.19	X 0.005
9				1.61				
10	1.52	0.92	-0.60 *	1.44	0.89	-0.55	0.19	X 0.02
11	1.51	0.99	-0.52 *	1.17	0.93	-0.24	0.22	X 0.002
12	1.40	0.87	-0.53 *	1.29	0.85	-0.44	0.14	X 0.03
15	1.20	0.58	-0.62 *	1.13	0.65	-0.48	-0.06	
16	1.44	0.67	-0.77 *	1.23	0.66	-0.57	-0.04	
17	1.31	0.65	-0.66 *	1.07	0.68	-0.39	-0.02	
18	1.16	0.72	-0.44	1.45	0.77	-0.68	0.06	
19	1.74	0.66	-1.08 *	1.23	0.57	-0.66	-0.13	
20#	1.09	0.64	-0.45 *	1.20	0.71	-0.49	0.00	
21	1.09	0.64	-0.45 *	1.25	0.72	-0.53	0.01	
22				0.81				
23	1.43	0.73	-0.70 *	1.30	0.71	-0.59	0.00	
ALL VA	1.35	0.65	-0.70 *	1.23	0.65	-0.58		

# Indicates the median VISN for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median VISN; SEP goal was not met.

Table 4-11. Means for Violence by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'96 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'96 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	1.00	0.60	-0.40 *	1.38	0.70	-0.68	0.01	
1	Togus	1.00	0.61	-0.39 *	1.44	0.68	-0.76	0.00	
1	Newington (West Haven)	1.08	0.75	-0.33	1.25	0.78	-0.47	0.09	
1	White River Junction	1.20	0.73	-0.47 *	1.57	0.75	-0.82	0.07	
2	Batavia (Buffalo)	1.19	0.56	-0.63 *	1.23	0.58	-0.65	-0.11	
3	Bronx				1.39				
3	Lyons	1.28	0.34	-0.94 *	0.80	0.32	-0.48	-0.36	0.0002
3	Montrose	1.55	0.38	-1.17 *	1.08	0.31	-0.77	-0.38	0.0001
4	Clarksburg	1.44	0.47	-0.97 *	0.90	0.53	-0.37	-0.15	
4	Coatesville	1.58	0.35	-1.23 *	1.67	0.27	-1.40	-0.41	0.0001
5	Baltimore	1.70	0.92	-0.78 *	1.44	0.81	-0.63	0.12	
5	Martinsburg	1.53	0.55	-0.98 *	1.25	0.49	-0.76	-0.20	0.05
6	Salem	1.14	0.45	-0.69 *	1.30	0.49	-0.81	-0.19	0.05
6	Salisbury	1.28	0.64	-0.64 *	1.01	0.66	-0.35	-0.02	
7	Augusta				1.03				
7	Tuskegee				1.41				
8	Bay Pines	1.58	0.83	-0.75 *	1.48	0.78	-0.70	0.09	
8	Miami	1.27	0.99	-0.28 *	1.30	1.02	-0.28	0.33	X 0.003
9	Louisville				1.61				
10	Brecksville (Cleveland)	1.61	1.23	-0.38	1.35	1.19	-0.16	0.50	X 0.003
10	Cincinnati	1.38	0.86	-0.52 *	1.51	0.88	-0.63	0.19	
10	Dayton	1.62	0.81	-0.81 *	1.39	0.75	-0.64	0.06	
11	Battle Creek	1.51	0.99	-0.52 *	1.17	0.93	-0.24	0.24	X 0.008
12	Milwaukee	1.45	0.67	-0.78 *	0.61	0.61	0.00	-0.08	
12	North Chicago	1.36	0.93	-0.43 *	1.29	0.92	-0.37	0.23	X 0.003
12	Tomah	1.48	0.81	-0.67 *	1.46	0.76	-0.70	0.07	
15	Topeka	1.20	0.58	-0.62 *	1.13	0.65	-0.48	-0.04	
16	Jackson	1.65	0.98	-0.67 *	1.47	0.92	-0.55	0.23	
16	New Orleans	1.27	0.56	-0.71 *	1.10	0.63	-0.47	-0.06	
16	North Little Rock	1.46	0.62	-0.84 *	1.21	0.61	-0.60	0.08	
17	Temple				0.95				
17#	Waco	1.31	0.65	-0.66 *	1.10	0.69	-0.41	0.00	
18	Phoenix				1.45				
18	Tucson	1.16	0.72	-0.44 *		0.77		0.08	
19	Denver	1.74	0.66	-1.08 *	1.17	0.58	-0.59	-0.11	
19	Sheridan				1.33				
20	American Lake	1.42	0.97	-0.45 *	1.12	0.93	-0.19	0.24	X 0.03
20	Anchorage				1.10				
20	Boise	1.27	0.55	-0.72 *	1.27	0.57	-0.70	-0.12	
20	Portland				1.33				
20	Roseburg	1.16	0.63	-0.53 *	1.17	0.69	-0.48	0.00	
20	Seattle	0.92	0.51	-0.41 *	1.20	0.62	-0.58	-0.07	
21	Hilo	1.50	0.69	-0.81 *	1.39	0.67	-0.72	0.04	
21	Palo Alto	1.00	0.63	-0.37 *	1.24	0.72	-0.52	0.02	
21	San Francisco				1.27				
22	West Los Angeles				0.81				
23	Minneapolis				1.60				
23	Knoxville				1.51				
23	Des Moines	1.57	0.99	-0.58 *	0.78	0.74	-0.04	0.05	
23	Hot Springs	1.29	0.68	-0.61 *		0.68		-0.01	
ALL VA		1.35	0.65	-0.70 *	1.23	0.65	-0.58		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.

Table 4-12. Means for Work (Days) by VISN

VISN	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'98 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	2.77	2.05	-0.72	2.82	2.13	-0.69	0.44	0.02
2	3.37	2.78	-0.59	2.02	2.90	0.88	1.23	
3	2.83	1.48	-1.35 @	7.54	1.34	-6.20	-0.34	
4	3.13	1.72	-1.41 @	2.15	1.72	-0.43	0.05	
5	1.36	0.59	-0.77	3.14	1.02	-2.12	-0.66	
6	2.77	0.32	-2.45 @	1.59	0.61	-0.98	-1.07	
7				1.92				
8	3.28	1.60	-1.68 @	2.70	1.41	-1.29	-0.27	
9								
10	2.82	3.23	0.41	4.12	3.44	-0.68	1.76	
11	1.57	1.90	0.33	2.76	2.36	-0.40	0.68	
12	2.82	2.17	-0.65	1.62	2.16	0.54	0.48	
15	3.02	1.28	-1.74 @	2.34	1.37	-0.97	-0.31	
16	2.96	1.87	-1.09 @	2.12	1.97	-0.15	0.29	
17	4.23	1.78	-2.45 @	2.09	1.31	-0.78	-0.37	
18	5.97	2.29	-3.68 @				-0.38	
19#	2.38	1.44	-0.94 @	2.61	1.68	-0.93	0.00	
20	3.37	1.72	-1.65 @	2.69	1.60	-1.09	-0.08	
21	3.08	1.31	-1.77 @	1.96	1.14	-0.82	-0.54	
22				3.70				
23	3.02	3.84	0.82	0.59	3.66	3.07	1.97	0.004
ALL VA	2.93	1.71	-1.22 @	2.79	1.71	-1.08		

# Indicates the median VISN for FY 2004.

\* Significant at  $p < .05$ . @ Outcome was significantly worse.\*\* X indicates that outcome for FY 2004 was significantly worse ( $p < .05$ ) than the median VISN; SEP goal was not met.  
No VISN was significantly worse than the median VISN for FY 2004.

Table 4-13. Means for Work (Days) by Station

VISN	Station	FY'04 Adm. Mean	FY'04 Foll. Mean	FY'04 Diff. Foll. - Adm.*	FY'98 Adj. Foll. Mean	FY'04 Adj. Foll. Mean	FY'04 - FY'98 Difference	Dev. of FY'04 Adj. Foll. Mean from the Median Mean**	Sig. Level
1	Northampton	4.66	1.60	-3.06 @	2.57	0.62	-1.95	-0.96	0.004
1	Togus	1.56	1.66	0.10		2.11		0.53	
1	Newington (West Haven)	1.72	3.39	1.67	3.35	2.81	-0.54	1.23	
1	White River Junction	2.92	3.92	1.00		4.86		3.28	
2	Batavia (Buffalo)	1.19	0.56	-0.63	1.88	2.33	0.45	1.23	0.05
3	Bronx				2.62				
3	Lyons	2.69	0.28	-2.41 @	11.22	0.81	-10.41	-0.77	
3	Montrose	2.94	2.50	-0.44	4.61	2.05	-2.56	0.47	
4	Clarksburg	2.30	1.30	-1.00	2.40	1.84	-0.56	0.26	0.0003
4#	Coatesville	3.34	1.83	-1.51 @	2.02	1.58	-0.44	0.00	
5	Baltimore	1.99	0.77	-1.22	3.11	0.63	-2.48	-0.95	
5	Martinsburg	1.08	0.51	-0.57	3.01	1.19	-1.82	-0.38	
6	Salem	1.84	0.20	-1.64 @	2.09	0.82	-1.27	-0.76	0.05
6	Salisbury	3.57	0.41	-3.16 @	1.10	0.36	-0.74	-1.22 X	
7	Augusta				1.42				
7	Tuskegee				2.16				
8	Bay Pines	2.53	0.72	-1.81 @	2.86	0.87	-1.99	-0.71	0.05
8	Miami	4.13	2.68	-1.45	2.48	2.12	-0.36	0.55	
9	Louisville								
10	Brecksville (Cleveland)	0.51	3.37	2.86	6.43	4.27	-2.16	2.69	
10	Cincinnati	3.83	1.20	-2.63	2.95	1.10	-1.85	-0.48	0.0003
10	Dayton	3.07	5.19	2.12	3.82	4.98	1.16	3.41	
11	Battle Creek	1.57	1.90	0.33	2.85	2.33	-0.52	0.75	
12	Milwaukee	4.30	2.16	-2.14		1.02		-0.55	
12	North Chicago	2.40	1.86	-0.54	1.40	2.09	0.69	0.51	0.0003
12	Tomah	3.18	2.98	-0.20	2.16	2.84	0.68	1.26	
15	Topeka	3.02	1.28	-1.74 @	2.26	1.32	-0.94	-0.26	
16	Jackson	3.69	0.91	-2.78	0.91	1.03	0.12	-0.55	
16	New Orleans	2.81	0.63	-2.18 @	2.05	0.91	-1.14	-0.66	0.0003
16	North Little Rock	2.82	2.64	-0.18	2.35	2.66	0.31	1.08	
17	Temple								
17	Waco	4.23	1.78	-2.45 @	2.12	1.29	-0.83	-0.28	
18	Phoenix								0.0003
18	Tucson	5.97	2.29	-3.68 @		1.35		-0.22	
19	Denver	2.38	1.44	-0.94 @		1.65		0.07	
19	Sheridan				2.69				
20	American Lake	3.25	1.63	-1.62	2.27	1.41	-0.86	-0.17	0.0003
20	Anchorage				9.58				
20	Boise	0.84	0.20	-0.64	1.12	1.09	-0.03	-0.50	
20	Portland								
20	Roseburg	3.31	1.41	-1.90 @	3.36	1.42	-1.94	-0.15	0.0003
20	Seattle	3.69	2.00	-1.69 @	2.13	1.80	-0.33	0.22	
21	Hilo	3.96	1.81	-2.15 @	2.47	1.70	-0.77	0.12	
21	Palo Alto	2.87	1.19	-1.68 @	1.82	1.06	-0.76	-0.52	
21	San Francisco								0.0001
22	West Los Angeles				3.76				
23	Minneapolis				0.59				
23	Knoxville								
23	Des Moines	0.69	1.06	0.37		1.79		0.22	0.0001
23	Hot Springs	5.23	6.55	1.32		5.58		4.00	
ALL VA		2.93	1.71	-1.22 @	2.79	1.71	-1.08		

# Indicates the median station for FY 2004.

\* Significant at p&lt;.05. @Outcome was significantly worse.

\*\* X indicates that outcome for FY 2004 was significantly worse (p&lt;.05) than the median station; SEP goal was not met.

Table 4-14. Outcomes Report Card by VISN

VISN	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	<i>Rank Comb. M</i>
1	0.04	0.04	-0.03	-0.04	0.00	-0.02	0.040	-0.023	0.018	<b>14</b>
2	0.01	0.00	0.00	0.00	-0.03	-0.04	0.005	-0.018	-0.013	<b>9</b>
3	-0.22	-0.19	-0.07	-0.08	-0.16	0.02	-0.205	-0.073	-0.278	<b>1</b>
4	-0.10	-0.08	-0.07	-0.02	-0.16	0.00	-0.090	-0.063	-0.153	<b>2</b>
5	-0.11	-0.07	-0.02	-0.01	-0.04	0.03	-0.090	-0.010	-0.100	<b>3</b>
6	-0.02	-0.03	-0.04	-0.06	-0.05	0.05	-0.025	-0.025	-0.050	<b>6.5</b>
8	0.04	0.06	-0.01	-0.03	0.06	0.01	0.050	0.008	0.058	<b>17</b>
10	0.00	0.03	-0.02	-0.03	0.05	-0.06	0.015	-0.015	0.000	<b>11</b>
11	0.07	0.07	0.03	0.06	0.07	-0.03	0.070	0.033	0.103	<b>18</b>
12	0.02	0.01	0.06	0.06	0.05	-0.02	0.015	0.038	0.053	<b>16</b>
15	0.00	-0.05	0.03	0.05	-0.02	0.01	-0.025	0.018	-0.008	<b>10</b>
16	0.00	0.04	-0.11	-0.13	-0.02	-0.02	0.020	-0.070	-0.050	<b>6.5</b>
17	-0.07	-0.05	-0.01	0.01	-0.01	0.01	-0.060	0.000	-0.060	<b>5</b>
18	0.01	0.00	0.02	0.04	0.01	0.01	0.005	0.020	0.025	<b>15</b>
19	-0.08	-0.07	0.04	0.04	-0.05	0.00	-0.075	0.008	-0.068	<b>4</b>
20	-0.03	-0.05	0.00	0.02	0.00	0.00	-0.040	0.005	-0.035	<b>8</b>
21	0.01	-0.01	0.03	0.00	0.00	0.02	0.000	0.013	0.013	<b>13</b>
23	-0.04	0.01	0.07	0.08	0.00	-0.07	-0.015	0.020	0.005	<b>12</b>
MEAN	-0.03	-0.02	-0.01	0.00	-0.02	-0.01	-0.02	-0.01	-0.03	
STD	0.07	0.06	0.05	0.05	0.06	0.03	0.06	0.03	0.09	

Table 4-15. Outcomes Report Card by Station

VISN	Station	Stand. Miss.	Stand. NEPEC	Stand. Alc.	Stand. Drug	Stand. Viol.	Stand. Work (rev.)	Stand. PTSD M	Stand. Other M	Stand. Comb. M	Rank Comb. M
1	Northampton	-0.02	0.00	-0.06	-0.04	0.00	0.02	-0.010	-0.020	-0.030	14
1	White River Junction	0.01	0.00	0.01	0.02	0.01	-0.06	0.005	-0.005	0.000	20
1	Togus	0.04	0.03	-0.03	-0.06	0.00	-0.02	0.035	-0.028	0.008	22
1	Newington (West Haven)	0.04	0.04	0.01	-0.01	0.01	-0.02	0.040	-0.003	0.038	30.5
2	Batavia (Buffalo)	0.01	0.00	-0.01	-0.01	-0.03	-0.04	0.005	-0.023	-0.018	16
3	Montrose	-0.23	-0.26	-0.10	-0.11	-0.12	-0.02	-0.245	-0.088	-0.333	1
3	Lyons	-0.08	-0.02	-0.04	-0.03	-0.10	0.03	-0.050	-0.035	-0.085	5
4	Coatesville	-0.10	-0.10	-0.10	-0.05	-0.16	0.00	-0.100	-0.078	-0.178	2
4	Clarksburg	-0.02	0.04	0.01	0.04	-0.03	-0.01	0.010	0.003	0.013	25
5	Martinsburg	-0.15	-0.10	-0.07	-0.06	-0.06	0.01	-0.125	-0.045	-0.170	3
5	Baltimore	0.02	0.00	0.03	0.05	0.02	0.02	0.010	0.030	0.040	32
6	Salem	-0.02	0.01	-0.07	-0.08	-0.05	0.03	-0.005	-0.043	-0.048	10
6	Salisbury	0.00	-0.04	-0.03	-0.03	-0.01	0.05	-0.020	-0.005	-0.025	15
8	Bay Pines	0.02	0.05	-0.03	-0.07	0.02	0.02	0.035	-0.015	0.020	26
8	Miami	0.03	0.03	0.02	0.01	0.08	-0.02	0.030	0.023	0.053	35
10	Dayton	-0.02	-0.01	-0.02	-0.04	0.01	-0.07	-0.015	-0.030	-0.045	11
10	Brecksville (Cleveland)	0.02	0.03	-0.04	-0.04	0.06	-0.04	0.025	-0.015	0.010	23.5
10	Cincinnati	0.01	0.05	0.00	0.01	0.03	0.01	0.030	0.013	0.043	33.5
11	Battle Creek	0.08	0.07	0.02	0.05	0.08	-0.03	0.075	0.030	0.105	37
12	Milwaukee	-0.03	-0.02	0.04	0.07	-0.01	0.01	-0.025	0.028	0.003	21
12	Tomah	0.01	0.00	0.06	0.03	0.01	-0.03	0.005	0.018	0.023	27.5
12	North Chicago	0.03	0.02	0.00	0.00	0.07	-0.02	0.025	0.013	0.038	30.5
15	Topeka	0.00	-0.05	0.02	0.05	-0.01	0.01	-0.025	0.018	-0.008	17.5
16	North Little Rock	0.00	0.04	-0.13	-0.14	-0.03	-0.05	0.020	-0.088	-0.068	7
16	New Orleans	-0.03	-0.02	-0.04	-0.04	-0.01	0.02	-0.025	-0.018	-0.043	12
16	Jackson	0.03	0.04	-0.02	-0.05	0.04	0.01	0.035	-0.005	0.030	29
17	Waco	-0.07	-0.05	-0.02	0.00	0.00	0.01	-0.060	-0.003	-0.063	8
18	Tucson	0.01	0.00	0.01	0.03	0.02	0.01	0.005	0.018	0.023	27.5
19	Denver	-0.07	-0.07	0.02	0.02	-0.04	0.00	-0.070	0.000	-0.070	6
20	Seattle	-0.06	-0.11	-0.03	0.00	-0.02	-0.01	-0.085	-0.015	-0.100	4
20	Boise	-0.07	-0.04	0.01	0.00	-0.01	0.01	-0.055	0.003	-0.053	9
20	Roseburg	0.00	0.02	-0.02	-0.03	0.00	0.00	0.010	-0.013	-0.003	19
20	American Lake (Tacoma)	0.04	0.05	0.01	0.03	0.06	0.00	0.045	0.025	0.070	36
21	Hilo	-0.01	-0.03	0.03	0.02	0.00	0.00	-0.020	0.013	-0.008	17.5
21	Palo Alto	0.01	0.00	0.01	-0.02	0.01	0.02	0.005	0.005	0.010	23.5
23	Hot Springs	-0.03	-0.02	0.00	0.05	0.00	-0.10	-0.025	-0.013	-0.038	13
23	Des Moines	-0.02	0.04	0.08	0.05	0.01	-0.01	0.010	0.033	0.043	33.5
MEAN		-0.02	-0.01	-0.01	-0.01	0.00	-0.01	-0.01	-0.01	-0.02	
STD		0.06	0.06	0.04	0.05	0.05	0.03	0.06	0.03	0.08	

Table 4-16. Satisfaction with Treatment by VISN

VISN	FY 1997 Adj. Mean	FY 2004 Adj. Mean	FY'04 - FY'97	Deviation of FY'04 Mean from the Median Mean*	Significance Level	<b>Rank</b>
1	16.01	16.53	0.52	0.33	0.005	<b>6</b>
2		17.05		0.85		<b>2</b>
3#	16.48	16.19	-0.29	0.00		<b>10</b>
4	16.62	16.18	-0.44	-0.01		<b>11</b>
5	15.68	16.02	0.34	-0.17		<b>13</b>
6	17.23	17.21	-0.02	1.01	0.0001	<b>1</b>
7						
8	15.67	16.23	0.56	0.04		<b>8</b>
9						
10	15.07	15.23	0.16	-0.96	X 0.002	<b>18</b>
11	15.63	15.66	0.03	-0.54	X 0.05	<b>15</b>
12	15.76	16.54	0.78	0.35		<b>5</b>
15	17.27	16.23	-1.04	0.04		<b>9</b>
16	16.16	16.70	0.54	0.51	0.02	<b>4</b>
17	15.18	15.53	0.35	-0.66	X 0.03	<b>16</b>
18		16.93		0.74	0.03	<b>3</b>
19	15.18	16.47	1.29	0.27		<b>7</b>
20	14.74	15.40	0.66	-0.79	X 0.0001	<b>17</b>
21	14.84	15.90	1.06	-0.30		<b>14</b>
22						
23	15.15	16.15		-0.05		<b>12</b>
ALL VA	15.69	16.23	0.54			

# Indicates the median VISN for FY 2004.

\* X indicates that satisfaction for FY 2004 was significantly worse ( $p < .05$ ) than for the median VISN.

Table 4-17. Satisfaction with Treatment by Station

VISN	Station	FY 1997 Adj. Mean	FY 2004 Adj. Mean	FY'04-FY'97	Deviation of FY'04 Mean from the Median Mean*	Significance Level	Rank
1	Northampton	17.44	17.09	-0.35	0.90	0.05	<b>6</b>
1	Togus		16.68		0.50		<b>11</b>
1	Newington (West Haven)	16.03	14.68	-1.35	-1.51	X 0.03	<b>36</b>
1	White River Junction		16.02		-0.17		<b>21</b>
2	Batavia (Buffalo)		17.10		0.92	0.02	<b>5</b>
3	Bronx	15.84					
3	Lyons	17.80	15.55	-2.25	-0.64		<b>30</b>
3	Montrose	15.41	16.86	1.45	0.67		<b>10</b>
4	Clarksburg	16.52	17.22	0.70	1.03	0.02	<b>2</b>
4	Coatesville		15.89		-0.29		<b>23</b>
5	Baltimore	14.33	15.26	0.93	-0.93	X 0.03	<b>33</b>
5	Martinsburg	16.63	16.43	-0.20	0.25		<b>14</b>
6	Salem	17.26	17.52	0.26	1.33	0.0002	<b>1</b>
6	Salisbury	17.12	17.07	-0.05	0.89	0.01	<b>7</b>
7	Augusta	15.25					
7	Tuscaloosa	15.06					
7	Tuskegee	15.67					
8#	Bay Pines	15.05	16.19	1.14	0.00		<b>19</b>
8	Miami	16.39	16.16	-0.23	-0.03		<b>20</b>
10	Brecksville (Cleveland)	14.75	14.74	-0.01	-1.44	X 0.02	<b>35</b>
10	Cincinnati	14.92	15.47	0.55	-0.72		<b>32</b>
10	Dayton	15.60	15.23	-0.37	-0.96	X 0.05	<b>34</b>
11	Battle Creek	15.59	15.71	0.12	-0.48		<b>26</b>
12	Milwaukee		15.53		-0.66		<b>31</b>
12	North Chicago	16.19	17.03	0.84	0.85	0.02	<b>8</b>
12	Tomah	15.05	15.84	0.79	-0.35		<b>25</b>
15	Topeka	17.47	16.27	-1.20	0.08		<b>17</b>
16	Jackson		15.85		-0.33		<b>24</b>
16	New Orleans	16.49	16.30	-0.19	0.11		<b>16</b>
16	North Little Rock	15.93	17.14	1.21	0.95	0.005	<b>4</b>
17	Waco	15.07	15.56	0.49	-0.62		<b>29</b>
18	Tucson		16.94		0.75		<b>9</b>
19	Denver		16.52		0.33		<b>13</b>
19	Sheridan	15.30					
20	American Lake (Tacoma)	13.91	15.63	1.72	-0.56		<b>28</b>
20	Boise	17.11	16.21	-0.90	0.02		<b>18</b>
20	Roseburg	16.14	17.19	1.05	1.00	0.03	<b>3</b>
20	Seattle	13.74	14.62	0.88	-1.57	X 0.0001	<b>37</b>
21	Palo Alto	14.84	15.66	0.82	-0.53		<b>27</b>
21	Hilo	14.99	16.60	1.61	0.42		<b>12</b>
23	Minneapolis	12.42					
23	Des Moines		15.98		-0.21		<b>22</b>
23	Hot Springs		16.38		0.19		<b>15</b>
ALL VA		15.69	16.23	0.54			

# Indicates the median station for FY 2004.

\* X indicates that satisfaction for FY 2004 was significantly worse ( $p < .05$ ) than for the median station.



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## **Appendix A**



## **Changes in Treatment of PTSD in the Department of Veterans Affairs, FY 1995 and FY 2004<sup>1</sup>**

Since 1995 there has been a period of major change in the Veterans Health Administration (VHA). Tables presented in this report primarily focus on changes during the past year. The tables presented in this appendix, in contrast, illustrate changes in the years since the VA reorganization was implemented.

Table A1 shows changes from FY 1995-FY 2004 in the number of programs operating in each VISN. The change in number of programs shows a net increase of 18 PCTs, 1 WSDTT, 8 PTSD Day Hospitals, 3 PTSD Doms, and 5 PRRPs.

Table A2 presents summary workload data on the work of specialized PTSD outpatient clinics: the PTSD Clinical Team (PCT) program, the Substance Use PTSD Team (SUPT) program, and the Women's Stress Disorder Treatment Team (WSDTT) program. Overall these programs saw 158.1% more patients in FY 2004 than in FY 1995, and intensity of contact (number of visits) increased by 108.3%.

Table A3 presents data on changes from FY 1995-FY 2004 in beds occupied during the end-of-the-year national census. There was a 66.3% decline in the total number of general psychiatry beds in VA; a 32.6% decline in the number of beds used for PTSD treatment; and a 51% decline in length of stay. There was a 4.6% increase in the total number of domiciliary and PRRP beds in VA; a 149.3% increase in the number of beds used for PTSD treatment; and a 59% decrease in length of stay.

Tables A4 and A5 present data on the change in the number and percent of patients receiving inpatient and residential treatment for PTSD. VA provided a total of 6,597 episodes of inpatient treatment for PTSD in FY 2004 compared to 14,849 in FY 1995. The average length of stay declined from 27.2 days in FY 1995 to 12.8 days in FY 2004, a 52.3% reduction. VA provided a total of 3,792 episodes of domiciliary and PRRP treatment for PTSD in FY 2004 compared to 715 in FY 1995. The average length of stay declined from 112.2 days in FY 1995 to 53.6 days in FY 2004, a 52.3 % reduction.

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<sup>1</sup> FY 1995 data not do not include PRRP care.

Table A1. VA SPECIALIZED PTSD PROGRAMS BY VISN: FY 1995, FY 2004 and FY 1995-2004 change.

Fiscal Year 2004											SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD DOM	PRRP	SIPU	WTRP		VISN*
1	5	1	1	0	2	0	1	1	0		11
2	3	0	0	0	1	0	0	0	0		4
3	5	0	0	0	0	2	0	0	0		7
4	3	1	0	0	0	0	2	0	0		6
5	3	0	0	0	1	1	0	0	0		5
6	5	0	0	0	0	0	0	2	0		7
7	6	0	0	0	0	0	0	0	0		6
8	5	0	0	0	0	1	1	0	0		7
9	5	0	0	0	0	0	0	0	0		5
10	5	0	1	0	3	0	0	0	0		9
11	5	0	0	0	0	0	1	0	0		6
12	2	0	1	0	0	1	2	0	0		6
15	5	0	0	0	0	0	0	1	0		6
16	9	0	1	0	0	1	2	0	0		13
17	5	0	0	0	0	0	1	0	0		6
18	4	0	0	1	0	0	0	0	0		5
19	3	0	0	0	1	0	0	0	0		4
20	4	0	0	2	0	1	0	1	0		8
21	4	1	0	0	0	0	2	0	1		8
22	5	0	1	0	0	0	0	0	0		6
23	5	1	0	0	0	0	2	0	0		8
ALL VA	96	4	5	3	8	7	14	5	1		143
AVERAGE	5	0	0	0	0	0	1	0	0		7
SD	1	0	0	0	1	1	1	1	0		2

Fiscal Year 1995											SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PSU/PTSD Dom	PRRP	SIPU	WTRP		VISN
1	6	2	1	2	0	0	1	3	0		15
2	2	0	0	1	0	0	0	0	0		3
3	4	0	0	1	0	1	0	2	0		8
4	4	1	0	1	0	0	0	1	0		7
5	3	0	0	1	0	0	1	0	0		5
6	5	0	0	0	0	0	0	2	0		7
7	5	0	0	0	0	0	0	3	0		8
8	4	1	0	0	0	0	0	2	0		7
9	6	0	0	0	0	0	0	0	0		6
10	1	0	1	1	0	0	1	1	0		5
11	4	0	0	0	0	0	0	2	0		6
12	3	0	0	0	0	1	0	2	0		6
15	4	0	0	0	0	0	0	1	0		5
16	5	1	1	2	0	1	0	1	0		11
17	4	0	0	1	0	0	1	1	0		7
18	4	0	0	0	0	0	0	1	0		5
19	4	0	0	1	0	0	1	1	0		7
20	3	1	0	3	0	0	3	1	0		11
21	4	1	0	1	0	1	0	0	1		8
22	3	0	1	0	0	0	1	1	0		6
23	6	2	0	2	0	0	1	0	0		11
ALL VA	78	7	4	15	0	4	9	25	1		143
MEAN	4	0	0	1	0	0	0	1	0		7
SD	1	1	0	1	0	0	1	1	0		3

Change in number of programs											SUM
VISN	PCT	SUPT	WSDTT	EBTPU	PTSD DH	PTSD Dom	PRRP	SIPU	WTRP		VISN
1	-1	-1	0	-2	2	0	0	-2	0		-4
2	1	0	0	-1	1	0	0	0	0		1
3	1	0	0	-1	0	1	0	-2	0		-1
4	-1	0	0	-1	0	0	2	-1	0		-1
5	0	0	0	-1	1	1	-1	0	0		0
6	0	0	0	0	0	0	0	0	0		0
7	1	0	0	0	0	0	0	-3	0		-2
8	1	-1	0	0	0	1	1	-2	0		0
9	-1	0	0	0	0	0	0	0	0		-1
10	4	0	0	-1	3	0	-1	-1	0		4
11	1	0	0	0	0	0	1	-2	0		0
12	-1	0	1	0	0	0	2	-2	0		0
15	1	0	0	0	0	0	0	0	0		1
16	4	-1	0	-2	0	0	2	-1	0		2
17	1	0	0	-1	0	0	0	-1	0		-1
18	0	0	0	1	0	0	0	-1	0		0
19	-1	0	0	-1	1	0	-1	-1	0		-3
20	1	-1	0	-1	0	1	-3	0	0		-3
21	0	0	0	-1	0	-1	2	0	0		0
22	2	0	0	0	0	0	-1	-1	0		0
23	-1	-1	0	-2	0	0	1	0	0		-3
ALL VA	18	-3	1	-12	8	3	5	-20	0		0



Table A-2. INTENSITY DATA: SOPPs by VISN: FY 1995, FY 2004, and FY1995-2004 change.

VISN	FY 1995			FY 2004			% Change: FY 1995-2004		
	SOPPs WORKLOAD			SOPP WORKLOAD			SOPPs WORKLOAD		
	Veterans Seen	Visits	Vis/Vet	Veterans Seen	Visits	Vis/Vet*	Veterans	Visits	Vis/Vet
1	2,983	32,579	10.92	4,185	43,519	10.40	40.3%	33.6%	-4.8%
2	570	7,083	12.43	1,328	12,468	9.39	133.0%	76.0%	-24.4%
3	1,142	17,745	15.54	3,802	46,496	12.23	232.9%	162.0%	-21.3%
4	2,125	22,253	10.47	3,589	30,353	8.46	68.9%	36.4%	-19.2%
5	758	10,866	14.34	2,262	21,876	9.67	198.4%	101.3%	-32.5%
6	1,600	15,951	9.97	4,205	27,602	6.56	162.8%	73.0%	-34.2%
7	1,231	12,687	10.31	5,130	42,293	8.24	316.7%	233.4%	-20.0%
8	1,835	16,984	9.26	3,738	30,279	8.10	103.7%	78.3%	-12.5%
9	1,163	5,307	4.56	3,218	19,025	5.91	176.7%	258.5%	29.6%
10	531	2,652	4.99	3,606	29,254	8.11	579.1%	1003.1%	62.4%
11	1,480	10,818	7.31	2,337	17,110	7.32	57.9%	58.2%	0.2%
12	679	7,733	11.39	1,325	14,320	10.81	95.1%	85.2%	-5.1%
15	1,332	17,460	13.11	3,067	30,228	9.86	130.3%	73.1%	-24.8%
16	3,826	36,276	9.48	11,506	98,875	8.59	200.7%	172.6%	-9.4%
17	1,231	15,789	12.83	3,666	29,624	8.08	197.8%	87.6%	-37.0%
18	1,815	18,648	10.27	4,469	32,021	7.17	146.2%	71.7%	-30.3%
19	1,062	10,339	9.74	1,742	11,009	6.32	64.0%	6.5%	-35.1%
20	1,545	20,290	13.13	6,025	53,291	8.84	290.0%	162.6%	-32.6%
21	1,197	14,456	12.08	3,403	34,537	10.15	184.3%	138.9%	-16.0%
22	917	11,315	12.34	4,548	44,424	9.77	396.0%	292.6%	-20.8%
23	2,341	26,642	11.38	3,198	26,813	8.38	36.6%	0.6%	-26.3%
ALL VA	31,074	333,873	10.74	80,201	695,417	8.67	158.1%	108.3%	-19.3%
AVERAGE	1,493	15,899	10.75	3,826	33,115	8.68	181.5%	152.6%	-15.0%
SD	806	8,458	2.72	2,120	18,980	1.57	130.5%	210.3%	23.4%
CV	0.54	0.53	0.25	0.55	0.57	0.18	0.72	1.38	-1.57

Table A3. Occupied Psychiatry, Domiciliary, and PRRP Beds with Primary Diagnosis of PTSD, by VISN: FY 1995, FY 2004, and FY 1995-2004 change, Annual VA Census.

VISN	FY 1995								FY 2004								% Change: FY 1995-2004							
	Inpatient PTSD Treatment				Domiciliary and PRRP Treatment†				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment				Inpatient PTSD Treatment				Domiciliary and PRRP Treatment			
	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS	Psych. Beds	PTSD Pts.	Pct. PTSD	LOS	PRRP Beds	PTSD Pts.	Pct. PTSD	LOS
1	796	66	8.3%	47.1	82	2	2.4%	95.5	299	25	8.4%	19.6	147	4	2.7%	64.0	-62.4%	-62.1%	0.7%	-58.5%	79.3%	100.0%	11.6%	-33.0%
2	311	16	5.1%	13.3	324	1	0.3%	282.0	50	3	6.0%	11.0	323	13	4.0%	18.0	-83.9%	-81.3%	17.6%	-17.3%	-0.3%	1200.0%	1204.0%	-93.6%
3	857	47	5.5%	47.2	173	2	1.2%	149.0	190	10	5.3%	16.3	355	48	13.5%	37.3	-77.8%	-78.7%	-4.3%	-65.5%	105.2%	2300.0%	1069.6%	-75.0%
4	582	78	13.4%	27.5	170	0	0.0%	0.0	206	5	2.4%	7.0	368	36	9.8%	38.6	-64.6%	-93.6%	-81.9%	-74.5%	116.5%			
5	287	9	3.1%	27.1	284	51	18.0%	118.8	105	2	1.9%	126.0	431	74	17.2%	71.7	-63.4%	-77.8%	-38.6%	364.9%	51.8%	45.1%	-4.4%	-39.6%
6	412	28	6.8%	29.6	254	7	2.8%	64.6	244	37	15.2%	18.5	209	0	0.0%	NA	-40.8%	32.1%	123.0%	-37.6%	-17.7%	-100.0%	-100.0%	-100.0%
7	794	156	19.6%	19.0	229	7	3.1%	203.9	159	12	7.5%	4.1	180	43	23.9%	43.8	-80.0%	-92.3%	-61.5%	-78.5%	-21.4%	514.3%	681.5%	-78.5%
8	380	54	14.2%	35.4	141	1	0.7%	365.0	105	8	7.6%	4.9	157	43	27.4%	31.7	-72.4%	-85.2%	-46.3%	-86.2%	11.3%	4200.0%	3761.8%	-91.3%
9	334	12	3.6%	15.0	443	4	0.9%	215.0	163	10	6.1%	16.8	283	5	1.8%	139.0	-51.2%	-16.7%	70.4%	12.0%	-36.1%	25.0%	95.7%	-35.3%
10	301	19	6.3%	23.5	415	22	5.3%	44.8	70	1	1.4%	1.0	331	9	2.7%	49.0	-76.7%	-94.7%	-77.3%	-95.7%	-20.2%	-59.1%	-48.7%	9.3%
11	779	47	6.0%	22.0					203	3	1.5%	17.7	101	22	21.8%	12.6	-73.9%	-93.6%	-75.4%	-19.7%				
12	606	44	7.3%	36.0	412	15	3.6%	156.1	119	7	5.9%	6.6	505	48	9.5%	52.6	-80.4%	-84.1%	-19.4%	-81.7%	22.6%	220.0%	161.1%	-66.3%
15	371	47	12.7%	49.3	181	0	0.0%		162	30	18.5%	35.6	258	4	1.6%	141.8	-56.3%	-36.2%	45.8%	-27.7%	42.5%			
16	487	43	8.8%	15.1	243	12	4.9%	112.6	266	6	2.3%	4.3	262	38	14.5%	25.5	-45.4%	-86.0%	-74.4%	-71.3%	7.8%	216.7%	193.7%	-77.3%
17	183	17	9.3%	14.2	677	17	2.5%	102.1	123	5	4.1%	9.2	744	59	7.9%	86.9	-32.8%	-70.6%	-56.3%	-35.2%	9.9%	247.1%	215.8%	-14.8%
18	164	36	22.0%	20.8	125	2	1.6%	199.0	70	8	11.4%	14.0	136	2	1.5%	97.5	-57.3%	-77.8%	-48.1%	-32.7%	8.8%	0.0%	-8.1%	-51.0%
19	252	44	17.5%	48.3					101	10	9.9%	9.8	38	4	10.5%	27.3	-59.9%	-77.3%	-43.4%	-79.7%				
20	182	55	30.2%	21.3	908	29	3.2%	228.7	107	26	24.3%	13.1	485	20	4.1%	65.2	-41.2%	-52.7%	-19.5%	-38.6%	-46.6%	-31.0%	29.1%	-71.5%
21	243	91	37.4%	88.7	45	0	0.0%		82	4	4.9%	6.3	62	25	40.3%	28.3	-66.3%	-95.6%	-87.0%	-93.0%	37.8%			
22	347	30	8.6%	27.2	208	18	8.7%	94.3	159	7	4.4%	5.7	208	31	14.9%	77.9	-54.2%	-76.7%	-48.8%	-79.0%	0.0%	72.2%	72.2%	-17.4%
23	390	26	6.7%	36.8	318	24	7.5%	66.6	69	0	0.0%	NA	308	30	9.7%	31.9	-82.3%	-100.0%	-100.0%	-100.0%	-3.1%	25.0%	29.1%	-52.1%
ALL VA	9,058	965	10.7%	35.1	5,632	214	3.8%	124.8	3,052	219	7.2%	17.2	5,891	558	9.5%	51.1	-66.3%	-77.3%	-32.6%	-51.0%	4.6%	160.7%	149.3%	-59.0%
AVERAGE	431	46	12.0%	31.6	296	11	3.5%	146.9	145	10	7.1%	17.4	281	27	11.4%	57.0	-62.0%	-70.0%	-26.2%	-34.8%	19.5%	596.7%	489.0%	-55.7%
S.D.	219	33	8.9%	17.6	210	13	4.3%	92.8	69	10	6.1%	26.7	168	21	10.3%	36.7	14.4%	30.6%	53.9%	96.1%	44.4%	1139.7%	957.8%	31.6%
C.V.	0.51	0.72	0.74	0.56	0.71	1.18	1.22	0.63	0.48	0.98	0.85	1.54	0.60	0.79	0.90	0.64	-0.23	-0.44	-2.06	-2.76	2.28	1.91	1.96	-0.57

† Only includes domiciliary beds.

Table A4. Patients treated for PTSD in general psychiatry inpatient beds and domiciliary and PRRP beds by VISN: FY 1995, FY 2004, and FY 1995-2004 change.

	General Psychiatry Inpatient Care												Domiciliary and PRRP Care											
	FY 1995				FY 2004				Change				FY 1995†				FY 2004				Change			
	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year	Episodes of Care	Unique Veterans	Bed Days/ Episode	Bed Days/ Vet/Year
1	1,299	906	25.7	37.2	634	511	16.1	20.0	-51.2%	-43.6%	-37.3%	-46.3%	1	1	53.0	53.0	25	23	93.4	101.5	2400.0%	2200.0%	76.2%	91.6%
2	415	295	20.3	28.6	111	94	7.9	9.4	-73.3%	-68.1%	-60.9%	-67.2%	11	11	142.8	142.8	324	248	12.2	15.9	2845.5%	2154.5%	-91.5%	-88.9%
3	699	552	38.1	47.7	187	154	13.8	16.8	-73.2%	-72.1%	-63.8%	-64.9%	22	22	124.0	124.0	329	308	60.0	64.1	1395.5%	1300.0%	-51.6%	-48.3%
4	839	597	33.5	47.1	276	240	18.2	20.9	-67.1%	-59.8%	-45.6%	-55.5%	11	10	113.6	125.0	185	178	64.5	67.0	1581.8%	1680.0%	-43.3%	-46.4%
5	184	135	19.4	24.8	153	133	8.0	9.2	-16.8%	-1.5%	-58.8%	-62.9%	145	139	117.9	123.0	313	295	79.2	84.0	115.9%	112.2%	-32.8%	-31.7%
6	1,179	691	13.9	24.3	884	678	15.2	19.8	-25.0%	-1.9%	9.4%	-18.4%	34	30	88.2	100.0	4	4	40.5	40.5	-88.2%	-86.7%	-54.1%	-59.5%
7	2,031	1,404	31.5	45.5	535	435	8.8	10.8	-73.7%	-69.0%	-72.1%	-76.2%	19	17	114.4	127.9	195	189	56.2	58.0	926.3%	1011.8%	-50.8%	-54.6%
8	776	589	27.4	36.7	293	254	5.3	6.1	-62.2%	-56.9%	-80.6%	-83.3%	4	4	90.0	90.0	264	259	49.1	50.0	6500.0%	6375.0%	-45.5%	-44.4%
9	460	318	13.7	18.5	321	252	8.6	10.9	-30.2%	-20.8%	-37.6%	-41.1%	14	13	173.4	186.8	6	6	172.5	172.5	-57.1%	-53.8%	-0.5%	-7.6%
10	321	251	22.0	28.8	141	122	6.0	7.0	-56.1%	-51.4%	-72.6%	-75.8%	93	91	70.8	72.4	164	154	52.2	55.6	76.3%	69.2%	-26.3%	-23.2%
11	684	490	25.1	35.1	138	116	12.4	14.7	-79.8%	-76.3%	-50.7%	-58.0%					350	280	25.3	31.7				
12	591	416	32.9	46.2	231	189	9.1	11.2	-60.9%	-54.6%	-72.2%	-75.8%	13	12	146.2	158.4	353	331	46.1	49.2	2615.4%	2658.3%	-68.5%	-69.0%
15	746	493	30.8	46.0	380	320	28.6	34.0	-49.1%	-35.1%	-7.1%	-26.1%	3	3	268.7	268.7	9	7	127.9	164.4	200.0%	133.3%	-52.4%	-38.8%
16	891	704	22.8	28.6	380	336	11.7	13.2	-57.4%	-52.3%	-48.9%	-53.9%	31	31	104.6	104.6	275	272	42.4	42.9	787.1%	777.4%	-59.5%	-59.0%
17	587	403	15.1	22.7	290	233	12.5	15.5	-50.6%	-42.2%	-17.4%	-31.6%	38	36	143.1	151.0	159	148	89.7	96.4	318.4%	311.1%	-37.3%	-36.2%
18	380	299	24.9	34.5	256	232	9.4	10.4	-32.6%	-22.4%	-62.3%	-70.0%	4	4	70.0	70.0	16	16	81.8	81.8	300.0%	300.0%	16.8%	16.8%
19	513	367	38.3	52.4	280	250	8.6	9.6	-45.4%	-31.9%	-77.6%	-81.7%					68	63	40.0	43.2				
20	856	669	24.0	31.8	636	569	14.8	16.6	-25.7%	-14.9%	-38.3%	-47.9%	55	51	157.9	170.2	151	146	53.2	55.0	174.5%	186.3%	-66.3%	-67.7%
21	599	482	53.0	63.5	176	145	9.3	11.3	-70.6%	-69.9%	-82.5%	-82.2%	0	0	0.0		283	274	58.2	60.1				
22	358	288	25.0	30.7	168	149	10.8	12.2	-53.1%	-48.3%	-56.6%	-60.2%	71	71	141.3	141.3	89	87	132.9	136.0	25.4%	22.5%	-5.9%	-3.7%
23	441	317	42.8	60.9	127	105	6.2	7.4	-71.2%	-66.9%	-85.6%	-87.8%	146	142	184.5	192.5	230	215	61.5	65.8				
All VA	14,849	10,666	27.2	37.8	6,597	5,464	12.8	15.5	-55.6%	-48.8%	-53.0%	-59.1%	715	682	112.2	117.7	3,792	3,440	53.6	59.1	430.3%	404.4%	-52.3%	-49.8%
AVG.	707	508	27.6	37.7	314	263	11.5	13.7	-53.6%	-45.7%	-53.3%	-60.3%	38	36	121.3	133.4	181	167	68.5	73.1	1183.3%	1126.5%	-34.9%	-33.6%
S.D.	409	277	9.8	12.4	203	162	5.3	6.3	18.5%	22.9%	25.3%	19.6%	45	44	57.1	51.7	125	113	38.0	41.2	1683.8%	1620.6%	39.1%	41.6%
C.V.	0.58	0.54	0.36	0.33	0.65	0.62	0.46	0.46	-0.34	-0.50	-0.47	-0.32	1.21	1.22	0.47	0.39	0.69	0.68	0.56	0.56	1.42	1.44	-1.12	-1.24

† Only includes domiciliary beds.

Table A5. Percent treated for PTSD by VISN: FY 1995, FY 2004, and FY 1995-2004 change.

VISN	Inpatient General Psychiatry						Domiciliary and PRRP					
	FY 1995		FY 2004		% Change: FY 1995-2004		FY 1995†		FY 2004		% Change: FY 1995-2004	
	Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD		Percent Tx. for PTSD	
	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans	All Episodes	Unique Veterans
1	18.1%	20.3%	1.3%	1.7%	-93.0%	-91.4%	2.9%	3.1%	5.3%	6.0%	84.7%	93.2%
2	13.7%	15.9%	5.3%	6.8%	-61.1%	-57.3%	3.2%	3.5%	19.6%	18.3%	512.2%	422.3%
3	10.9%	13.8%	7.0%	7.8%	-35.8%	-43.3%	0.0%	0.0%	15.8%	18.2%		
4	13.1%	16.4%	49.2%	51.5%	275.3%	213.7%	0.0%	0.0%	7.3%	7.6%		
5	6.5%	7.6%	7.7%	9.3%	18.8%	21.7%	0.0%	0.0%	15.5%	16.7%		
6	16.4%	16.3%	12.2%	12.5%	-25.3%	-23.3%	21.0%	19.4%	0.3%	0.3%	-98.5%	-98.3%
7	24.1%	26.7%	16.5%	17.2%	-31.6%	-35.5%	31.9%	33.5%	32.2%	32.0%	0.8%	-4.3%
8	9.7%	11.1%	6.3%	6.2%	-34.6%	-43.9%	20.3%	21.2%	19.9%	21.2%	-2.0%	-0.1%
9	8.8%	9.1%	5.3%	6.5%	-40.0%	-28.6%	2.4%	2.7%	1.5%	1.6%	-36.3%	-41.0%
10	8.4%	10.1%	8.8%	10.3%	4.5%	2.0%	18.3%	19.8%	5.1%	5.9%	-71.8%	-70.1%
11	12.1%	13.3%	3.8%	4.8%	-68.6%	-63.7%	0.0%	0.0%	40.9%	39.4%		
12	10.6%	12.6%	4.6%	5.5%	-56.2%	-56.4%			15.8%	15.9%		
15	12.6%	13.6%	12.5%	13.2%	-0.8%	-3.0%	13.0%	13.0%	1.9%	1.6%	-85.1%	-88.0%
16	11.8%	13.2%	6.4%	7.7%	-45.4%	-41.5%	0.0%	0.0%	21.3%	22.1%		
17	11.1%	12.7%	4.0%	4.8%	-63.7%	-62.0%	0.5%	0.5%	5.9%	7.1%	1092.2%	1297.8%
18	10.1%	12.3%	1.5%	1.9%	-84.9%	-84.5%	0.0%	0.0%	0.6%	0.7%		
19	19.6%	22.4%	22.8%	25.0%	16.1%	11.6%	22.6%	23.1%	15.7%	16.1%	-30.3%	-30.5%
20	21.0%	24.8%	9.1%	9.7%	-56.6%	-61.0%	15.8%	16.4%	8.5%	8.9%	-45.9%	-45.5%
21	14.1%	18.5%	4.7%	5.3%	-66.9%	-71.6%	0.5%	0.5%	37.0%	38.6%	8066.7%	8117.1%
22	5.8%	7.6%	8.0%	8.0%	38.6%	5.0%	0.4%	0.4%	12.6%	12.8%	2887.0%	2812.9%
23	16.1%	17.8%	3.4%	4.6%	-78.7%	-74.4%	0.0%	0.0%	10.6%	10.8%		
All VA	12.9%	14.8%	3.6%	4.4%	-72.3%	-70.0%	0.0%	0.0%	12.5%	13.0%		
Avg.	13.1%	15.1%	9.5%	10.5%	-23.3%	-28.0%	7.6%	7.9%	14.0%	14.4%	944.1%	951.2%
S.D.	4.7%	5.3%	10.4%	10.8%	77.3%	64.2%	10.2%	10.5%	11.6%	11.6%	2296.9%	2308.2%
C.V.	0.36	0.35	1.09	1.03	-3.31	-2.29	1.34	1.34	0.83	0.80	2.43	2.43

† Only includes domiciliary beds.

## **Appendix B**

### **Summary of Special Emphasis Program Goals**



This Appendix recapitulates the goals for special emphasis programs for PTSD as presented in VHA Directive 96-051, *Veterans Health Administration Special Emphasis Programs*. We have modified Population Measures 1 - 3 and Program Measure 2 and added Population Measure 6 with the approval of the Clinical Quality Improvement Specialist, Office of Performance and Quality, VA Headquarters. Population Measures 4 and 5 and Program Measures 1 and 3 remain unchanged. Population Measures 1, 2, 3 and 6 specify outcome goals for PTSD, substance abuse, work and violence. We have introduced technical modifications to the meeting of these goals so that the methods used are consistent with the methods used elsewhere in the National Mental Health Program Performance Monitoring System (Rosenheck & DiLella, 1998; Kaspro et al., 1997; Seibyl et al., 1997).

**Population Measure 1** as modified is:

*Change in PTSD symptoms on the short form of the Mississippi Scale from admission to follow-up 4 months after discharge.*

*Goal: Program not significantly worse than the median program.*

Our experience in monitoring outcomes suggests that alcohol abuse and drug abuse should be considered separately. Outcomes for the two are not related highly to each other, despite them both being forms of substance abuse; combining them masks some differences among programs. Therefore, **Population Measure 2** is modified by splitting it into two Measures, as follows:

*Change in alcohol abuse symptoms as measured by the Alcohol Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.*

*Goal: Program not significantly worse than the median program.*

*Change in drug abuse symptoms as measured by the Drug Abuse Composite of the Addiction Severity Index from admission to follow-up 4 months after discharge.*

*Goal: Program not significantly worse than the median program.*

**Population Measure 3** as modified is:

*Change in occupational functioning as measured by the number of days employed or the number of dollars earned from work during the past 30 days from admission to follow-up 4 months after discharge.*

*Goal: Program not significantly worse than the median program.*

**Population Measure 4**, unmodified, is:

*Proportion of veterans in need of PTSD care treated for PTSD in VA outpatient mental health clinics in each year.*

*Goal: Fifty-five percent.*

**Population Measure 5**, unmodified, is:

*Proportion of veterans who receive a psychiatric outpatient visit within 30 days of discharge from an inpatient program.*

*Goal: Greater than 51%.*

**Population Measure 6**, newly added, is:

*Change in violence as measured by the Violence Scale as modified from the National Vietnam Veterans Readjustment Study from admission to follow-up 4 months after discharge.*

*Goal: Program not significantly worse than the median program.*

**Program Measure 1**, unmodified, is:

*Proportion of veterans successfully contacted for outcome assessment after discharge from an inpatient PTSD program.*

*Goal: 50%.*

**Program Measure 2** has been changed from “Number of patients seen...” to “Number of patients treated...” It is possible for programs to screen a large number of veterans with one contact each, without providing meaningful treatment in the process. The criterion for treatment to consist of more than one contact provides a lenient definition of treatment and, at the same time, eliminates the potential reward for focusing on performing a large number of screening contacts with limited benefit to the veterans involved. Program Measure 2 now is:

*Number of patients treated (that is, seen more than once) per filled FTEE in the outpatient PTSD program (including facility contributed FTEE).*

*Goal: 75 patients/filled FTEE.*

**Program Measure 3**, unmodified, is:

*Number of hospital days for patients in the 6 months after discharge from an inpatient PTSD program.*

*Goal: Less than 13.5 days.*



## **Appendix C**



### Calculation of **FILLED FTEE** and **DIRECT COST**

Appendix C is a description of the procedure for calculating **FILLED FTEE** (tables 3-1, 3-2, 3-5, 3-6, 3-7, and 3-8) and **DIRECT COST** (Part I, tables 4 and 5; tables 3-9, 3-10, 3-11, 3-12) for Specialized PTSD Programs.

Filled FTEE and Direct Cost are calculated from data supplied from the *Specialized PTSD Programs Annual Report*. These data include the following items from Parts 2 and 5 on the Annual Report form: Part 2 - "Total Recurring All Other Funds Expended up to \$9999.00"; Part 5, item c - "Start and End Dates", which are used to determine time worked for the VA facility; Part 5, item d - "Number of Hours Worked Per Pay Period for the Facility"; Part 5, item e - "Actual Salary Plus Benefits Paid for Work at the Facility for this Fiscal Year"; Part 5, item f, "Start and End Dates", which are used to determine time worked for the program; and Part 5, item g - "Total Number of Hours Committed Per Week to the Program".

Steps for calculating **FILLED FTEE**:

1. Using the program Start Date and End Date (item "f", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the program. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Program***.
2. Divide the Number of Hours Committed Per Week to the Program (item "g", for *each* of the completed sections numbered 1-48, in Part 5 of the Annual Report) by 40 to determine the ***Portion of A Full FTEE Worked for the Program During The Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Program by the Portion of A Full FTEE Worked for the Program During The Fiscal Year to determine the ***Filled Program FTEE*** for each individual staff member.
4. For Specialized Outpatient PTSD Programs, sum the Filled Program FTEE for each staff member within a program to determine the total ***FILLED FTEE***, for each program (tables 3-1, 3-2, 3-5 and 3-6).
4. For Specialized Intensive PTSD Programs, sum the Filled Program FTEE for each staff member across programs at a facility to determine the total ***FILLED FTEE***, for each facility (tables 3-3, 3-4, 3-7 and 3-8).

Steps for calculating ***DIRECT COST***:

1. Using the facility Start Date and End Date (item "c", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) determine the total number of days worked during the fiscal year for the facility. Divide the total number of days by 364 to determine the ***Portion of the Fiscal Year Worked for the Facility***.
2. Divide the Number of Hours Worked Per Pay Period for the Facility (item "d", for *each* of the completed sections numbered 1-48, Part 5 of the Annual Report) by 80 to determine the ***Portion of A Full FTEE Worked for the Facility During the Fiscal Year***.
3. Multiply the Portion of the Fiscal Year Worked for the Facility by the Portion of A Full FTEE Worked for the Facility During The Fiscal Year to determine the ***Filled Facility FTEE*** for each individual staff member.
4. Multiply the Actual Salary Plus Benefits Paid by the factor  $[1/\text{Filled Facility FTEE}]$  to determine the ***Full-time Equivalent Salary & Benefits for working at the facility*** for each individual staff member.
5. Multiply the Full-time Equivalent Salary & Benefits by the Filled Program FTEE to determine ***Actual Salary & Benefits for the Program*** for each individual staff member.
6. For Specialized Outpatient PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars or ***DIRECT COST***, by program (tables 3-9 and 3-10).
7. For Specialized Intensive PTSD Programs, sum the Actual Salary & Benefits for the Program for each staff member reported in the Annual Report and the Total Recurring All Other Funds to determine Total Program Dollars, for each program. Then sum the Total Program Dollars for each program at a facility to determine the ***DIRECT COST***, for the facility (tables 3-11 and 3-12).

## **Appendix D**

### **Programs with Inadequate Data\***

There were no Specialized Intensive PTSD Programs with inadequate data for fiscal year 2004.



## **Appendix E**

### **Treatment of PTSD Inside and Outside of Specialized Programs**





Appendix E presents information regarding differentiation of treatment in different types of settings in VA, as specified in VHA Directive 2000-004, “Definition of Levels of Specialization in Post-Traumatic Stress Disorder (PTSD) Services”. This directive delineates the types of outpatient PTSD services available in VA, both inside and outside of specialized programs.

Table E1 presents the total number of unique veterans with a primary diagnosis of PTSD who received outpatient PTSD treatment in the VA system for FY 2003, by VISN. These veterans are separated first by all veterans who received any treatment from a Specialized Outpatient PTSD Program (62,270). Of the remaining veterans, those who received any treatment from a PTSD Specialist (15,536) were counted. Then, of the remaining veterans, those who received any treatment from a mental health program (122,856) were counted. Those remaining are the veterans who received outpatient treatment only from a non-mental health program (21,279). Across these groups, each veteran with a primary diagnosis of PTSD who received specialized outpatient treatment in VA is counted only once.

Table E-2 presents the total number of veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD specialists by VISN, and the number of visits those veterans received, for FY 2003.

Table E3 presents the number of unique veterans who, regardless of primary diagnosis, received outpatient individual and group treatment from PTSD Specialists by facility, and the number of visits those veterans received, for FY 2003. Table E3 also indicates if a Specialized Outpatient PTSD Program (PCT, SUPT or WSDTT) was operating at each of those facilities during FY 2003.

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**DEFINITION OF LEVELS OF SPECIALIZATION IN  
POST-TRAUMATIC STRESS DISORDER (PTSD) SERVICES**

**1. PURPOSE:** This Veterans Health Administration (VHA) Directive provides working definitions to assist in clearly identifying VHA strategy in providing both specialized and general Post-traumatic Stress Disorder (PTSD) services.

**2. BACKGROUND**

a. Public Law 104-262, the Veterans Healthcare Eligibility Reform Act of 1996, §1706(b)(1), requires VHA to maintain its capacity to provide for the specialized treatment and rehabilitation needs of disabled veterans (including those with ... mental illness) within distinct programs or facilities...that are dedicated to the specialized needs of those veterans..."

b. The "Report to Congress on Maintaining Capacity to Provide for the Specialized Treatment and Rehabilitation Needs of Disabled Veterans," dated May 1, 1997, defines the overall group of disabled mentally ill veterans into two main groups: those diagnosed with a serious mental illness (SMI) and those diagnosed with PTSD. This Directive addresses the latter group.

c. In order to obtain a wider range of views in formulating a VHA-wide approach, on March 25, 1999, the Office of the Under Secretary appointed a Seriously and Chronically Mentally Ill (SCMI) Strategic Implementation Committee composed of four Clinical Managers, a medical center Director, a Mental Health Care Line Director, the National Director of the Northeast Program Evaluation Center (NEPEC), a representative of Vietnam Veterans Association, and a representative of the Mental Health Strategic Healthcare Group.

d. This Directive differentiates among general, specialty, and special program designation within the Mental Health service area. The Directive identifies distinctions of each and the accountability expected from a designated special program. Described here are the definitions of each and the general levels of expertise of the staff providing care in each area. To assist in clearly identifying VHA strategy in providing PTSD services, this Directive specifically applies the general principles agreed upon to PTSD services.

**3. POLICY:** It is VHA policy to use the definitions in subparagraph 4.a. to distinguish specialized PTSD programs from general PTSD care at all facilities and to use the appropriate Treating Specialty Codes and Decision Support System (DSS) Identifiers, as described, to record workload starting in Fiscal Year (FY) 2000.

**4. ACTIONS**

a. **Definitions.** The following definitions are to be used by all facilities:

**THIS VHA DIRECTIVE EXPIRES FEBRUARY 28, 2005**

**VHA DIRECTIVE 2000-004**  
**February 22, 2000**

(1) **Specialized PTSD Treatment Programs.** To qualify as a Specialized PTSD Treatment Program, the program must:

(a) Have a designated program leader who has the responsibility and authority to lead and manage the team as well as to provide clinical evaluations of care.

(b) Be composed of providers (more than a single provider) in one location who are experts in the care of PTSD, with their expertise acquired through education, training, and supervision of care. These providers form a team whose team members spend the preponderance of their time caring for veterans with PTSD needing specialized services. To ensure that a veteran who is enrolled in the special program has continuous access to a team provider, the team must be of sufficient size to cover for staff absences.

*NOTE: Specialized PTSD Programs may have, in addition, team members who are at remote access points and/or facilities. These members should be maintaining an active consultative relationship with the core team members, sharing in the discussion of patients and continuing education activities.*

(c) Be visibly identified by patients as a program. To enable this identification, the core team members should be located in close proximity to each other.

(d) Participate in the mandated national program evaluation for specialized PTSD treatment programs.

(e) Enter data into designated bed section codes and clinics with special DSS identifiers. These include:

1. Patient Treatment File (PTF) Treating Specialty Codes 26, 38, 79, 88 and 91; and
2. The following DSS Identifiers:
  - a. 519 (Substance Use Disorder and/or PTSD teams),
  - b. 525 (Women's Stress Disorder Teams),
  - c. 540 (PCT Post-traumatic Stress, Individual),
  - d. 561 (PCT-Post-traumatic Stress, Group),
  - e. 580 (PTSD Day Hospital), and
  - f. 581 (PTSD Day Treatment).

*NOTE: For Specialized PTSD inpatient programs that include a significant outpatient clinical team (e.g., over one Full-time Employee Equivalent (FTEE)), the outpatient component should*

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*use DSS Identifiers for PCTs (540 and 561) to record outpatient visits. In addition, the outpatient component needs to participate in the national program evaluation for specialized PTSD treatment programs as a PCT.*

**(2) Specialty PTSD Care Outside of a Specialized Program.** Specialty PTSD care outside of a specialized program is identified by:

(a) A provider recognized as a specialist, through designation in the provider's clinical privileges, scope of practice statement, or core competencies as set forth in the medical staff by-laws and/or general personnel practices, or through specific designation as a specialist by the care line director or service chief. The provider is required to demonstrate annual continuing education activities in the diagnosis and treatment of PTSD.

(b) The provider maintaining accepted levels of expertise for the specialty care of patients with PTSD. **NOTE:** *The usual review established by the medical staff bylaws and facility will be utilized to certify continued practice. The clinician must see an adequate number of cases to maintain expertise; the adequate number of cases to be determined by the care line director or service chief.*

(c) PTSD specialists, not associated with a specialized PTSD treatment program, entering outpatient workload into clinics with the following DSS identifiers:

1. 516 (PTSD, Group),
2. 562 (PTSD, Individual),
3. 524 (Active Duty Sex Trauma), and
4. 589 (Non-active Duty Sex Trauma).

**(3) General Mental Health Care.** General Mental Health Care is defined as:

(a) Care provided by Mental Health practitioners who are not specially, or extensively, trained in PTSD treatment or whose focus of care is generalized. These clinicians:

1. Provide routine screening and treatment to patients with PTSD in milder forms and/or who have other co-existing mental illness.
2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.
3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

(b) Care by non-Mental Health practitioners. These clinicians:

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1. Provide care for PTSD and its symptomatic manifestations as part of general or primary care practice.

2. Identify care provided for PTSD by recording PTSD as the diagnosis on the encounter form.

3. Utilize PTSD specialty consultation or referral for exacerbation of PTSD symptoms not resolved with general interventions or where clinically indicated.

b. **Responsibilities.** Responsibilities are defined as follows:

(1) **Facility or Care Line Actions.** The facility Director, or designee, is responsible for:

(a) Identifying and reviewing specialist skills, through designation in the specialist's clinical privileges, scope of practice statement or core competencies as set forth in the medical staff bylaws and/or general personnel practices, or through specific designation by their care line director or service chief as a specialist, required to demonstrate annual continuing education activities in the diagnosis and treatment for PTSD. ***NOTE: This designation must meet usual standards of practice and review criteria.***

(b) Using National DSS identifiers and bed section conventions to designate specialized PTSD programs and specialty PTSD care.

(c) Providing complete nationally-adopted monitoring information for specialized programs in a timely manner.

(2) **Monitoring by NEPEC.** The NEPEC is responsible for:

(a) Producing periodic reports on the structure, process, and outcome of PTSD services.

(b) Providing population-based data on the availability and access to specialized PTSD Programs, PTSD Specialty Care, and PTSD general care.

1. The population estimates for assessment of the availability and access to specialized PTSD programs will be calculated as follows:

a. **Numerators.** Numerators are the number of unique veterans in specialized PTSD programs (any designated PTSD specialized program) weighted for intensity of such services.

b. **Denominators.** Denominators are the number of veterans in the network who are service-connected for PTSD.

2. Reports will be generated that characterize access to PTSD specialty care, and where data is available, contract services for PTSD.

(3) **Veterans Integrated Services Network (VISN) Actions.** The VISN Director, or designee, is responsible for:

- (a) Providing PTSD services based on an assessment of population-based need.
- (b) Establishing strategies to provide Network enrollees access to PTSD specialized programs.

*NOTE: If access to specialized PTSD programs is to be provided outside the geographic VISN boundaries or contractually, a written plan and formal contract relationship is to be developed and reviewed by the VHA Mental Health Strategic Healthcare Group.*

- 5. **REFERENCES:** VHA Program Guide 1103.3, June 3, 1999, pages 26-30, 61-65.
- 6. **FOLLOW-UP RESPONSIBILITY:** The Chief Consultant, Mental Health Strategic Healthcare Group (116) is responsible for the contents of this Directive.
- 7. **RESCISSION:** None. This VHA Directive expires February 28, 2005.

S/ Melinda Murphy for  
Thomas L. Garthwaite, M.D.  
Deputy Under Secretary for Health

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Table E-1. VA PTSD Outpatient Treatment by Specialized Programs, Specialists, Mental Health and Non-Mental Health Stops, by VISN, FY 2004.

VISN	Specialized Outpatient PTSD Programs*	PTSD Specialists**	Mental Health Non- Specialized Stops***	Non-Mental Health Stops****
	#Unique Veterans	#Unique Veterans	#Unique Veterans	#Unique Veterans
1	3682	735	8644	1868
2	1098	917	4380	735
3	3412	777	5818	565
4	2983	1089	6655	1205
5	1689	308	3470	536
6	3901	211	10200	1270
7	4336	2938	10556	1469
8	3335	1216	10727	1483
9	2636	235	6492	1140
10	3980	377	3494	642
11	1854	620	3474	487
12	1147	1738	3968	775
15	2815	336	5324	801
16	9322	623	9984	2070
17	3124	457	7683	1598
18	3886	881	6556	1559
19	1094	348	5483	1166
20	4996	535	8359	1523
21	2550	526	8022	1328
22	3726	543	7046	1295
23	2700	838	4021	645
SUM	68,266	16,248	140,356	24,160
All VA	67,955	16,158	138,836	24,031

\*Specialized Outpatient PTSD Program (SOPP) visits are defined by the following outpatient file stop codes: PCT individual 540 and PCT group 561, SUPT individual and group 519, and WSDTT 525.

\*\*PTSD Specialist visits are defined by outpatient file stop codes 516 for group and 561 for individual visits.

\*\*\*Mental Health Non-Specialized stops: General psychiatry outpatient visits are defined by outpatient file stop codes 501-506; 509-512; 515, 520-521, 524, 529, 531-533, 535, 541, 550-554, 557-560; 563-566; 573-578; 580-590).

\*\*\*\*Any outpatient stop code other than those specified in the groups above.

Table E-2. VA PTSD Outpatient Treatment by PTSD Specialists,  
by VISN, FY 2004\*.

VISN	VISITS	#UNIQUE VETERANS	#Visits/ Veteran
1	7,203	1,159	6.2
2	9,649	1,039	9.3
3	17,960	1,148	15.6
4	10,245	1,687	6.1
5	3,382	803	4.2
6	2,495	301	8.3
7	39,688	3,628	10.9
8	11,863	1,428	8.3
9	3,591	329	10.9
10	4,716	683	6.9
11	11,518	887	13.0
12	18,263	2,024	9.0
15	3,841	604	6.4
16	5,171	1,226	4.2
17	10,149	754	13.5
18	6,779	1,036	6.5
19	5,197	377	13.8
20	7,210	682	10.6
21	5,001	785	6.4
22	14,602	1,051	13.9
23	13,855	1,094	12.7
SUM	212,378	22,725	9.3

\*Entries from Austin Outpatient File Stop Codes 516 and 562 comprise the data in this table.



Table E-3. VA PTSD Outpatient Treatment by Specialists, by Facility, FY 2004\*

VISN	STA. CODE	FACILITY	Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'04
			# VISITS	#UNIQUE VETERANS	
1	518	BEDFORD	1474	59	PCT, WSDTT
1	523	BOSTON	183	45	
1	523BZ	BOSTON (OPC)	695	90	PCT
1	523A5	BROCKTON VAMC	484	110	
1	402GA	CARIBOU	346	69	PCT
1	650GB	HYANNIS CBOC	147	13	
1	631	NORTHAMPTON	492	88	PCT
1	650	PROVIDENCE	295	14	
1	402	TOGUS	2685	360	PCT, SUPT
1	689	WEST HAVEN	402	319	
2	528A4	BATAVIA DIVISION	628	129	PCT
2	528GN	BINGHAMTON CBOC VT	241	9	
2	528A8	HCS UPSTATE NY V2 ALBANY	4077	294	
2	528A6	HCS UPSTATE NY V2 BATH	2804	487	
2	528GE	ROCHESTER CBOC UPS NY	125	21	
2	528GM	ROME CBOC	210	20	
2	528	UPSTATE N.Y. HCS	1488	90	
2	528G8	WELLSVILLE CBOC NY	76	15	
3	561BZ	BRICK	4207	226	PCT
3	526	BRONX	87	37	
3	630A4	BROOKLYN DIVISION	1556	125	
3	620A4	CASTLE PNT VA HUDSON HCS NY	937	66	
3	561A4	LYONS	196	169	
3	620	MONTROSE VA HUDSON HCS NY	6230	324	
3	620GA	NEW CITY (ROCKLAND) CBOC	176	13	
3	632	NORTHPORT	4565	206	
4	693B4	ALLENTOWN-SOC	2790	374	PCT
4	529	BUTLER	226	15	
4	540	CLARKSBURG	1590	289	
4	562	ERIE	989	182	
4	503	JAMES E. VAN ZANDT VAMC	1403	79	
4	595	LEBANON	1961	370	
4	642	PHILADELPHIA (OLD)	320	46	
4	542GG	PHILADELPHIA CBOC	38	32	
4	693GA	SAYRE (CBC)	125	17	PCT
4	693	WILKES BARRE	791	283	
5	512	BALTIMORE	2350	637	PCT
5	512GF	FORT HOWARD CBOC MD	195	28	
5	613	MARTINSBURG	811	147	PCT
6	637	ASHEVILLE-OTTEEN	826	40	
6	658	SALEM	1549	233	PCT
6	659BY	WINSTON-SALEM-SOC	119	27	
7	508	ATLANTA	6624	452	PCT
7	544	COLUMBIA SC	16092	1200	
7	619GA	COLUMBUS OPC	958	286	
7	521GB	DECATUR CBOC AL	362	49	
7	521GC	FLORENCE CBOC AL	672	34	
7	544GB	FLORENCE CBOC SC	536	54	
7	544BZ	GREENVILLE,SC-SOC	456	54	
7	521GA	HUNTSVILLE CBOC	986	61	
7	509A0	LENWOOD	373	33	PCT
7	521GD	RAINBOW CTY CBOC	805	37	
7	544GC	ROCK HILL CBOC	38	10	PCT
7	679	TUSCALOOSA	6064	984	
7	619A4	TUSKEGEE	5722	454	PCT

VISN	STA. CODE	FACILITY	Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'04
			# VISITS	#UNIQUE VETERANS	
8	673GA	BREVARD CBOC	717	53	PCT
8	573BZ	DAYTONA BEACH-SOC	2128	151	
8	546GB	KEY WEST (CBC)	230	13	
8	546	MIAMI	75	70	
8	673BY	ORLANDO-SOC	364	83	
8	673BZ	PORT RICHEY-SOC	1700	154	
8	672	SAN JUAN PR	44	19	
8	673	TAMPA	388	35	
8	548	W PALM BEACH	6205	855	
9	581	HUNTINGTON	662	73	PCT
9	626BY	KNOXVILLE(SOC)	61	14	
9	596	LEXINGTON-LEESTOWN	300	89	PCT
9	614	MEMPHIS	127	20	PCT
9	626	NASHVILLE	1393	63	
9	581GA	PRESTONSBURG	533	51	
9	626A4	VA TENNESSEE VALLEY HCS	515	20	
10	541A0	CLEVELAND-BRECKSV.	1984	116	PCT, WSDTT
10	757	COLUMBUS-IOC	1264	339	PCT
10	552	DAYTON	921	193	PCT
10	552GC	RICHMOND CBOC IN	381	20	
10	552GD	SPRINGFIELD CBOC OH	149	12	
11	515	BATTLE CREEK	1758	287	PCT
11	515GC	BENTON HARBOR CBOC	309	29	
11	515BY	GRAND RAPIDS-SOC	1283	94	
11	583	INDIANAPOLIS-10TH ST	5905	307	
11	610	NORTHERN INDIANA HCS	27	1	PCT
11	655	SAGINAW	2235	181	
12	695BY	APPLETON	957	121	PCT
12	537BY	CROWN POINT	324	37	
12	578	HINES	1046	71	
12	585	IRON MOUNTAIN	324	62	
12	676GC	LACROSSE CBOC WI	817	102	
12	607	MADISON	485	53	
12	585HA	MARQUETTE	39	19	
12	695	MILWAUKEE	3850	429	
12	556	NORTH CHICAGO	4620	546	
12	585GB	RHINELANDER CBOC WI	34	9	
12	676	TOMAH	4117	422	
12	537	VA CHICAGO HCS	656	30	PCT
12	676GA	WAUSAU CBOC WI	994	169	
15	657GJ	EVANSVILLE CBOC IN	183	21	PCT
15	657A4	JJP VAMC POPLAR BLUFF MO	187	26	
15	657A0	ST LOUIS-Jeff Bks.	526	50	
15	589A4	TRUMAN VH COLUMBIA MO	617	58	
15	589	VAMC HEARTLAND-W KANSAS MO	849	325	PCT
15	657A5	VAMC MARION DIV MARION IL	1479	124	
16	502	ALEXANDRIA	1057	91	PCT
16	564	FAYETTEVILLE AR	667	484	
16	586	JACKSON	135	69	
16	502GA	JENNINGS CBA	46	11	
16	635GA	LAWTON (CBC)	493	55	
16	667GC	LONGVIEW CBOC	39	18	
16	520GA	MOBILE (CBC)	203	46	
16	564BY	MT. VERNON-SOC	544	118	
16	598A0	N. LITTLE ROCK	223	54	PCT
16	629	NEW ORLEANS	24	13	PCT, WSDTT
16	635	OKLAHOMA CITY	85	6	PCT
16	520BZ	PENSACOLA-SOC	38	36	
16	667	SHREVEPORT	1468	128	PCT
16	623BY	TULSA-SOC	112	83	PCT

VISN	STA. CODE	FACILITY	Stops 516 + 562		Specialized Outpatient PTSD Programs Open in FY'04
			# VISITS	#UNIQUE VETERANS	
17	549A4	BONHAM VAMC	1903	136	PCT
17	674GB	BROWNWOOD CBOC	816	39	
17	674GC	BYRAN CBOC CENTEX	670	40	
17	674GD	CEDAR PARK, TX CBOC	280	27	
17	549	DALLAS	497	18	
17	549BY	FORT WORTH	1589	96	
17	671A4	KERRVILLE	697	37	
17	674GA	PALESTINE CBOC	1529	83	
17	671BY	SAN ANTONIO-SOC	1696	241	
17	671GB	VICTORIA (OCS)	472	37	
18	504	AMARILLO HCS	861	312	PCT
18	756	EL PASO HCS	744	75	
18	756GA	LAS CRUCES	995	165	
18	504BY	LUBBOCK, TX-SOC	1241	227	
18	644BY	MESA	1771	112	
18	644	PHOENIX	255	32	
18	501HB	RATON (ORC)	359	59	
18	644GB	SHOW LOW CBOC	353	33	
18	644GA	SUN CITY	22	3	
18	519	WEST TEXAS HCS	177	24	
19	554GE	COLORADO SPGS CBOC CO	427	40	PCT
19	436	FORT HARRISON	323	27	
19	575	GRAND JUNCTION	286	10	
19	554GG	LA JUNTA CBOC CO	285	18	
19	554GH	LAMAR CBOC CO	227	13	
19	554GD	PUEBLO CBOC CO	2139	122	
19	666GC	RIVERTON COBC	329	50	
19	666	SHERIDAN	1180	98	
20	463	ALASKA HCS & RO	628	83	PCT
20	663A4	AMERICAN LAKE	26	18	
20	653GA	BANDON	667	40	
20	531	BOISE	22	22	
20	653GB	BROOKINGS CBOC	128	54	
20	653BY	EUGENE-SOC	858	99	
20	687GA	RICHLAND CBOC	160	25	
20	653	ROSEBURG	3928	258	
20	687	WALLA WALLA	793	87	
21	570	CENTRAL CALIFORNIA HCS	1186	148	PCT
21	662GC	EUREKA CBOC	843	177	
21	459GB	HILO	836	262	
21	654	RENO	442	17	
21	612A4	SACRAMENTO VAMC	1694	181	
22	691	GREATER LA HCS	7510	534	PCT, WSDTT
22	605	LOMA LINDA	473	48	
22	600GC	LONG BEACH CBOC	299	88	
22	691GB	SANTA BARBARA CBOC	55	10	
22	691A4	SUPULVEDA OPC (DIV)	1973	120	
22	600	VA LONG BEACH HCS CA	4292	269	
23	656GA	BRAINERD CBOC	1360	101	PCT
23	636GB	NORTH PLATTE CBOC NE	25	7	
23	568HF	PINE RIDGE SD	60	15	
23	568HJ	ROSEBUD IHS HOSPITAL SD	172	23	
23	656	ST CLOUD	7755	378	
23	636GC	VA CBOC MASON CITY IA	488	44	
23	636A6	VA CPHN DES MOINES IA	1752	220	
23	636A4	VA CPHN GRAND ISLAND	1962	310	
23	636A5	VA CPHN LINCOLN	31	8	
23	636	VA NEB-WESTERN IA HCS	247	28	
173 sites		TOTAL	212,261	22,981	
		MEAN	1,227	133	
		STD	1,910	176	

\*Entries in the Austin Outpatient File from Stop Codes 516 (group visits) and 562 (individual visits) comprise the data in this table.



## **Appendix F**

### **Acronyms and Abbreviations Used in the Text**



## **Acronyms and Abbreviations**

ASI	Addiction Severity Index
AVG	Average
BD	Bed Days
CDR	Cost Distribution Report
C.V.; CV	Coefficient of Variation
DC; D/C	Discharge
DD214	Dept. of Defense Form #214
DH	Day Hospital
Dx (Dx'd)	Diagnosis (Diagnosed)
EBTPU	Evaluation and Brief Treatment PTSD Unit
FTEE	Full Time Employee Equivalent
FY	Fiscal Year
INDVDLS	Individuals
LOS	Length of Stay
M	Mean
MH	Mental Health
N	Number
NEPEC	Northeast Program Evaluation Center
PCT	PTSD Clinical Team
PDP, PTSD Dom	PTSD Domiciliary Program
PRRP	PTSD Residential Rehabilitation Program
PSF	PTSD Status Form
PTF	Patient Treatment File
PTSD	Posttraumatic Stress Disorder
PTSS	Posttraumatic Stress Syndrome
RCS	Readjustment Counseling Service
SA	Substance Abuse
SC	Service Connected
S.D.; SD; STD	Standard Deviation
SEP	Special Emphasis Program
SIPP	Specialized Intensive PTSD Program
SIPU	Specialized Inpatient PTSD Unit
SOPP	Specialized Outpatient PTSD Program
SUPT	Substance Use PTSD Team
Tx	Treatment
VA	Dept. of Veterans Affairs
VAMC	Dept. of Veterans Affairs Medical Center
VHA	Veterans Health Administration
VISN	Veterans Integrated Service Network
WSDTT	Women's Stress Disorder Treatment Team
WSI-1	War Stress Interview - Part 1
WTRP	Women's Trauma Recovery Program

